

CHAPTER 1

INTRODUCTION



As with anyone whose background is non-medical science, the topic on the concept of disease and medicine is perhaps difficult to be tackled by an MA student. Medical practitioners and pharmacists would certainly have more knowledge of medicine itself than I do - I may not be able to compete on the knowledge of medicine itself. Any readers of this thesis start to feel that it is rather futile for me to carry out the research on the topic of traditional medicine even at this point.

But I consider the area of health is important and still relevant to me even though I am not myself a medical practitioner. I should add here that the concern of maintaining good health is not just my personal concern but with everyone's - whether you be a medical scientist or not.

There are several new important phenomena concerning the field of traditional medicine at various levels in Thai society that could have shifted the paradigm in the field of health care and treatment. The interests of traditional medicine are growing rapidly. For examples, the Ministry of Public Health (MOPH) began to “re-recognise” traditional medicine, at the heart of decision-making authority in Thai Public Health. Within the Ministry of Public Health, there is a new institute established in the year 1993 called “The National Institute of Thai Traditional Medicine” in order to specialize in the field that used to be only the Western medicine. As for the non-government side, NGOs are also showing interests in the field of traditional medicine, which could have been the captivity of a minority group of pharmacists and medical doctors. These ‘new’ developments will be explained in full, after completed the in-depth interviews of the key health-related personnel on the new phenomena just mentioned.

There will be separate, later chapters to examine the initial hypothesis just as the two initial objectives coming soon may require some adjustments and reinterpretations. Nevertheless, at the beginning of this research, I have decided to carry out my research with the hypothesis of my thesis as the followings :

Hypothesis at the start of the Thesis

The popularity and the increase in the use of traditional medicine from the year 1993 till now have been the result of a new wave in health seeking behaviour among the middle-class Bangkokians due to the paradigm shift in health care and treatment. The paradigm shift here concerns with the situation where the middle-class Bangkokians prefer an ordinary course of nature in nutrition and health care, and develop some uncertainty towards modern medicine.

I am certainly new to the topic of disease and medicine, and Thai medical specialists could have already researched out on the issues of the use of traditional medicine in Thailand. But as I have gone through my research with valuable assistance from various people and resources, there seems to be certain trends in the area of health care or health in general in this country. Since health is such a big subject, whether one uses traditional medicine or not is perhaps one of too many choices in terms of health seeking behaviour. However, I need to look at the middle-class Bangkokians and their possible "uses" of traditional medicine as one example in order to analyze what it means by health, the middle-class and the Bangkokians. I hope

this research will provide an opportunity to investigate and bring to light the 'situation' of traditional medicine and its impacts to the urban middle-class in Bangkok and Thai society.

The details of the methodology for this thesis will be set in the Methodology Chapter later, but at the beginning of this work, I have set two main objectives in my thesis apart from verifying the earlier mentioned hypothesis. The initial two objectives may have some limitations but nevertheless they are:

Two initial Objectives

1. To analyze the situation concerning the use of traditional medicine by the middle-class in Thai urban society, and
2. To investigate factors associated with the use and non-use of traditional medicine by the urban middle-class in Bangkok.

By looking at my thesis title, one may wonder why the time period begins from the year 1993 onwards, not really from somewhere around the Sukhothai period, for instance. In fact, I will cover a brief historical development of traditional medicine in this

country as early as the Dvaravadi era. However, the purpose of my thesis is neither only on the description of traditional medicine in historical development nor the scientific laboratory research of medicine in the fields of biology, chemistry or pharmacy. There are also some reasons that I need the bracket on the word "use" - i.e. "user", rational "use" of drug. What it means by the "uses" of traditional medicine among the middle-class Bangkokians should be carefully examined later, as I stated in the hypothesis of my thesis at the beginning.

I will discuss more in details later, but being time specific also has some meanings. It was actually the year 1993 when the National Institute of Thai Traditional Medicine was established at the Ministry of Public Health. The year was chosen as a good marking year for my research and I am taking this time as one concrete example to see if there is a new wave in the areas of health care and treatment with the special emphasis on traditional medicine.

At the same time, there will be fine tunings of the every definition of "Traditional Medicine" and "the Middle – Class" as well as the "Bangkokians" in Thai society during the given year period in this thesis. It is in fact curious for me to find out after researches that the definitions of the "Middle – Class" and the "Bangkokians" *later* became vivid by focusing heavily on the "use" of "traditional medicine" at *first*. As it will be noted on the

methodology section, the sequence of the research flow was possibly initially read to be: *first* target the “real” Middle – Class Bangkokians by taking the sample and *later* look at any use of traditional medicine by the ‘previously – thought’ Middle - Class Bangkokians, not the other way round. But it will still suffice the two initial objectives of this thesis when this piece of work is interpreted as: *the situation analysis of the “Middle – Class” & the “Bangkokians” as well as the definitions of traditional medicine & the “use” by focusing on the use of traditional medicine and the factors associated with such “use” and “non-use” of traditional medicine in Thai society.*

Some Historical Backgrounds of Traditional Medicine in Thailand

Part 1: Traditional medicine as a way of and a part of everyday life

There are various articles found in Thailand commenting on the historical development of traditional medicine, but it is still difficult to state exactly when the art of Thai traditional medicine started. There is much more to comment than the era of prior-to modern Thailand hosted knowledge in traditional medicine and health care. This is to

mean that all human beings have continuously looked for better living conditions on the basic needs of food, clothing and shelter in order to stay healthy. Happy life begins with healthy body and soul, and the search for maintaining good health did not seem to confine from Sukhothai period, for instance. There are some historians who considered this art of traditional medicine in Thailand had begun as early as the Dvaravati period, circa 6th Century, when large stone metate and stone roller were considered to be used in order to compound medicine, but this case may not be the only story (NITTM, 1995: 13). The search for good health is perhaps universal throughout the history of civilization, with various trial and error.



Fig. 1.1. Human Beings in search of better Health and Medicine

The most important relic left over from the Sukhothai period is the King Ramkamhaeng Inscription. This Inscription is known to have vividly described the way of life in the Sukhothai period (1238-1377 A.D.) but there is still very little known concerning the ways of medical care and treatment in this period (NITTM, 1995: 13).

This is because it is difficult to find concrete evidence in the forms of khumpee bai laan (which could have lasted for several centuries without failure), samud koi or other types of stone inscriptions. Here, khumpee bai laan is ancient Thai scripture hand written onto dried young talipot palm leaves, and samud koi is another type of paper made from the bark of siamese rough bush.

The Ayutthiya period started from 1350 and lasted until 1767 and is noted for the wider contact of then Siamese with the Westerners. The field of medicine during those time seemed to be no exception as various Christian missionaries visited the country and the Siamese's contacts with them are often regarded as the first arrival of western medicine in Siam. Apart from the various western prescription brought into Siam, there are some traditional prescriptions still surviving in the central Thailand now which were originated from the Ayutthiya period. One of such is Tamrub Phra Osod Phra Narai or King Narai's drug recipes in the period of 1659 – 1661 (NITTM, 1995: 15). The example here includes Ointment used for open wounds and boils, and the recipe used various sorts of ingredients from minerals, plants and animals.



Fig. 1.2. Various herbals noting on the Thai Traditional Medicine

After the changes of capital from Thonburi to Bangkok, the Siamese people started to re-organise the drug system - the herbal of Phra Khumpee Suppakun by HRH Prince Wongsathirajsanit and the collections of Phra Khumpee Chantasart by Phraya Chantaburi are the two most famous during the early Bangkok period (NITTM, 1995: 19).

Traditional medicine has reached the high in Siam during the period of King Rama III. What is often considered as the symbol of traditional medicine here derives from him, and Wat Raj Oros in Thonburi and Wat Phra Chetuphon Wimmonmangkhalaram are the two best examples (NITTM, 1995: 19).



Fig. 1.3. The Art of Thai Traditional Massage

Wat Raj Oros is famous for 55 marble tables with 180 herbal drug receipts inscribed on for temple wall decoration (NITTM, 1995: 23). Wat Phra Chetuphon Wimmonmangkharam is better as Wat Pho, and the foreigners usually have their first image of traditional medicine in Thailand here. The popularity especially among the foreigner tourists visiting Thailand indicates that "Thai Traditional Medicine Is Wat Pho, and Wat Pho Is Thai Traditional medicine". There are 317 marble slabs bearing 1100 drug receipts at the temple wall together with probably the most renowned traditional massage centre in Thailand (NITTM, 1995: 19).

Part 2: The inroads of western medicine into Siam and the subsequent decline of the traditional medicine in Thailand

It is well noted that the Western medicine in ideas and medicine itself arrived in Siam well before the Modernization period. But it is also noteworthy that the Western medicine did not have significant status in the medical field and the traditional medicine as a way of life did not change significantly until the Modernization period starting from King Rama the 3rd to King Rama the 5th. The wide - acceptance of traditional medicine in the early Bangkok period started to decline, however. The major incidence of Siam in the fields of public health during the 19th century had been the outbreaks of small pox and cholera. In non - health developments, the Siamese people saw their neighbours falling in the hands of the British and the French, and there was a compelling reason that western medicine may work better when health care is classified as one of western 'technologies' (Sunait & Tun, 1995) (Wyatt, 1984). There are several reasons why the decline of traditional medicine started here around the mid - 19 Th century. But this cholera epidemic as the internal factor and the situation at the neighbouring countries as the external factor should be counted as one of such reasons - the traditional medicine in Thailand could not deal effectively with new disease whereas the western medicine could deal better than the traditional script. An American Christian missionary,

Dr. Dan Bradley, introduced the first small pox vaccination to Thailand in 1835. for example (NITTM, 1995: 23).

King Chulalongkorn is today well noted as the advocator of the modernisation even at the field of health. But he was also the one to issue a Royal Decree to create what is considered as the very first comprehensive traditional medical book - Paletsart Sonkhrau Chabub Luang - in 1870 (NITTM, 1995: 27). This book has two volume texts that Royal Medical Department had been assigned by the King to review and reassess the traditional herbal remedies. It was nevertheless during King Chulalongkorn's era that Sri Raj hospital was established.

Sri Raj hospital was set up in 1888 as the first public hospital in Siam (NITTM, 1995: 27). The western idea is that health care for human well being is "public" rather than individual or community affairs started from this time period. The concepts of disease and medicine started to shift the paradigm from community health care to public health, with the emphasis on the introduction of western medicine. If it were to only follow the duality of being the "modern" and the "traditional" or the "western" and the "eastern", it is well noted that the "traditionalists" may well comment that Sri Raj hospital is the very

"symbol "of the decline of traditional medicine (Health in Thailand. MOPH. 1997: 159).

But as it has been noted earlier, it is important to realise that what is described as the 'other 'counterpart of health care system - namely the modern or the western - had been prevalent well before the early Bangkok period.

Various laws had been passed even after the mixed era of modern and traditional with King Chulalongkorn and the influence of so-called western medicine began to widen throughout the country. As the public hospitals were started to set up in the nation-wide, the responsibilities of village healers and community doctors were passed on to the medical practitioners at the public health institutions. The change from traditional to western in this country could be described as gradual and steady - even Sri Raj hospital, the very symbol of the modern health care system, first started with the prescriptions of both traditional and modern medicine at the time of establishment (NITTM, 1995: 27).

The Part 1 of historical development concerned with traditional medicine as a "Way of Life" and a "Part of Everyday Life". The alternative choices of other forms came in much later as in the Part 2, especially after the Modernization period of King Rama the 3rd to

King Rama the 5th , when alternative choices of especially the Western medicine started to establish the status when old and traditional style of medicine began to lose the power as a part of everyday life. This thesis will look at the Part 3 of such development, when there is a new era in the field of health care and treatment where there is a possible paradigm shift as mentioned at the hypothesis section.