

Non-white med students reject therapies associated with their culture

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Non-white medical students are more likely to embrace orthodox medicine and reject therapies traditionally associated with their cultures. That is one finding from an international study that measures the attitudes of medical students toward complementary and alternative medicine (CAM). While seemingly counter-intuitive, white students view CAM more favorably than their non-white counterparts, the study authors say.

CAM is the common, collective term that describes non-orthodox therapies considered not intrinsic to the politically dominant health system of a particular society or culture.

Despite the growing popularity of CAM, many medical schools do not include CAM teachings within basic medical education. So researchers at four medical schools (Peninsula, UK; Birmingham, UK; Georgetown, USA; and Auckland, NZ) conducted two surveys to measure the attitudes of medical students toward CAM during their first and fourth year of medical training in schools that offer some CAM education either at the undergraduate or graduate level. The study is published online in *Medical Teacher*.

"The first study we conducted with first-year medical students indicated that overall, students wanted more information about CAM in their curriculum," said Hakima Amri, PhD, director of the Complementary and Alternative Medicine Program at Georgetown University Medical Center, the only science-based CAM Master's program at an academic



institution in the United States. Amri is a co-investigator and the lead author of the US component of the study. "Our follow-up study measured attitude changes about CAM during medical training. We didn't observe a significant change in overall attitude between the first and fourth year, but we did spot some other interesting trends."

Amri says in the first study, U.S. medical students wanted more courses about CAM than students in Hong Kong, for example. (The Hong Kong school was not included in the 2nd survey of fourth year students.) The second study continued to support that trend with the least interest in CAM measured in Asian and black students.

Amri also noted the polarization observed in the second survey. She says, overall, females, older students and those who had used CAM had more positive attitudes towards holistic treatment of health conditions and became more positive in their attitude over time. However, males and non-CAM users had more negative tendencies toward the effectiveness of CAM therapies and continued to become more negative over time.

"One explanation for the decrease in positive attitude about CAM may result from the students' increased medical knowledge and contact with skeptical clinicians, which are not counter-balanced by CAM teaching," Amri explains.

Survey Methodology

Researchers used a survey called Integrative Medicine Attitude Questionnaire (IMAQ), which included 28 questions relevant to CAM, with each item accompanied by a 7-point Likert scale (point scale with responses ranging from strongly disagree to absolutely agree plus don't know). The IMAQ include three major foci: Attitudes toward holism; effectiveness, credibility and value of CAM; and focus on the doctorpatient relationship, reflection and self-care.



The IMAQ also asked questions about students' age, gender, race, specialty choice, whether they had used CAM or seen a CAM practitioner previously and whether they were interested in or had already undertaken a CAM course.

A total of 604 first-year medical students at six schools completed the questionnaire. Only students who indicated willingness to complete the second questionnaire were contacted to participate in the second survey three years later. A total of 154 out of 487 (31.6 percent) of fourth year students at four schools completed the questionnaire.

The authors note limitations of the study and recommend additional research to understand more about attitude change over time with respect to CAM practices.

Source: Georgetown University Medical Center

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