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'Integrative Health' As a Political Project: Institutional Arrangements Towards CAM at the Federal Level in the U.S.

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ABSTRACT

In 2015, the *National Institutes of Health* (NIH) centre dedicated to medical research on CAM, formerly the *National Center for Complementary and Alternative Medicine* (NCCAM), changed its name to the *National Center for Complementary and Integrative Health* (NCCIH). Instituting CAM as adjuncts rather than alternatives to conventional care, the political decisions behind this semantic shift reveal processes of re-legitimation after crises as well as the critiques and controversies federal institutions had to face in the field of medical research on CAM from the 1990s until today.

These re-legitimisations at the federal level now revolve around the emerging project of 'integrative health' in the U.S. in answer to non-federal and multiform configurations taken by the promotion and practice of 'integrative medicine' (consortia, academic hospitals and research units, private clinics, professional groups, etc.). 'Integrative medicine' has already been through processes of legitimisation since the 1990s (such as evidence-based and standardised practices). In 2008, 'integrative medicine' became an official physician specialty. In fact, both federal and non-federal legitimisations towards integration are now being articulated together.

Based on a networked ethnography of those institutions and their related network of interactions, this presentation will show how those double processes of legitimisation are

still set in place through interactive institutional arrangements. Nonetheless, this double legitimisation towards 'integrative health' does not always meet the general consensus and is confronted by oppositions and resistances from both federal and non-federal agents and institutions, notably when cancer is concerned. These institutional arrangements bring into question not only conflicting places assigned to CAM within the American health system but also the construction of various CAM categories and the particular place assigned to them within research protocols and their translationality, thus fostering new challenges to medical research.