

Country-Doctor, Hospital-Doctor
and "Guinea Pigs"

In 1945 responsibility for Indian health services in Canada was transferred from the Indian Department where it had been traditionally allocated to the Department of National Health and Welfare. The impact of this Federal administrative change was manifested on the Six Nations Reserve in a series of rapid innovations which began at the local hospital in 1950. Research conducted by myself under contract with the National Museum of Canada between 1963 and 1966 indicated that changes in policy and practice of the hospital served to direct critical attention of the Six Nations to the role qualifications and role performance of the physicians. The subsequent conflict between the Indian patient and the hospital-centered physician climaxed in a well publicized "show down," as it was called, in 1962. At this time the Band Council presented to the Federal health officials malpractice accusations of some six non-Conservative residents, and demanded an explanation of the physicians' behavior. This "show down," I might add, did not even partially resolve the conflict.

It is the purpose of this paper to demonstrate how one Iroquoian reserve community responded to a change in the physician's role from that of a country-doctor to that of a hospital-centered physician. Their response was found to entail the interpretation of role change as a threat to their access to Western medicine as it is presented locally, and a situation that they alone feel they are subjected to simply because they are "Indian."

The country-doctor role, although historically presented by many