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EXERCISING AGENCY IN MEDICAL
DECISION-MAKING PROCESSES:
A CASE STUDY OF 67HA, ANTANANARIVO

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The formal integration of traditional and biomedicine has been touted as a prime method to improve access to quality healthcare in Madagascar. However, without a proper understanding of the considerations that influence how individuals navigate medical diversity, efforts at integration will only risk further institutionalizing inequities in access to care, depriving marginalized populations of their medical decision-making capacities. Thus, through conducting interviews with 100 residents of 67ha, Antananarivo, as well as traditional and biomedical practitioners, I sought to gain a more nuanced understanding of the myriad factors that influence Malagasy health-seeking strategies. Research findings suggest that the medical decision-making capacities of vulnerable populations in Antananarivo are seriously compromised by widespread mistrust and misinformation surrounding biomedicine. This is in large part caused by the corrupt actions of healthcare professionals, particularly in the public sector where individuals lacking in financial resources are most likely to seek treatment. On the other hand, by using traditional medicine (TM), marginalized populations can use knowledge passed down from their ancestors to improve their health. Moreover, utilization of TM has historically served as a symbolic action of resistance against Western influence in Madagascar. In order to maximize patient agency in medical decision-making processes, efforts to curb corruption within public healthcare facilities are critical. Further investment in the regulation and research of traditional medicine, particularly its sociocultural and macigo-religious elements, is necessary.