This thesis is a descriptive study about the plural healthcare system on Siberut Island, Indonesia. The study explores the theoretical concepts of medical systems and medical pluralism in relation to the case study of Siberut Island. For the situation encountered on the island, Arthur Kleinman’s model of health care systems and Tapio Nisula’s term medical culture are appropriate. Because the study concentrates on describing the traditional shamanic medical system of Siberut on one hand, and the relatively recent biomedical healthcare on the other, the theoretical chapter includes discussion on ethnomedicine and the medical anthropological study of biomedicine. In this study, biomedicine is viewed as one ethnomedicine among others. Its basis in the Cartesian dualism and how this shows in biomedical theory and practice is discussed. This thesis is written in the spirit of critical medical anthropology (CMA), paying attention to macro-level processes such as national politics and policies, economy, history, questions of identity etc.

The thesis is based on data collected during a seven month field work period in 2003, out of which approximately three months were spent in the small village of Ugai on Siberut. Siberut belongs to the Mentawai Archipelago, on the western side of Sumatra. Siberut is the biggest island of the archipelago, and has until recently remained fairly untouched by outside influences. In the last two decades, it has become increasingly known internationally due to its unique nature and indigenous culture. The field data was collected through participant observation, discussions with villagers and people working in healthcare, and some interviews. In addition, available literature on Siberut and on healthcare seeking and medical pluralism has been used.

After the theoretical considerations, the thesis first describes Siberut and its history, then the traditional cosmology and healing practices related to it. The history and functioning of biomedical healthcare on the island is discussed next. The last two chapters discuss the plural health care system as a whole, describing what factors affect healthcare seeking. Seven case histories are presented to give the reader an understanding of the lived reality of Siberut’s plural healthcare system.

Using Kleinman’s model, three sectors can be identified in the Siberutan health care system: 1) the folk sector (of self-medication with herbal remedies and over the counter biomedical products), 2) the traditional sector (of shamans, herbalists and traditional midwives), and 3) the professional sector (of biomedical doctors and nurses). The sectors are overlapping and complementary.

People on Siberut Island use the plural medical system flexibly according to their needs and depending on their situation. They do not view the different kinds of healthcare as separate bounded systems, and see no contradiction in using e.g. shamanic healing and biomedical healthcare simultaneously or consecutively. Especially the providers of biomedical healthcare formulate stricter boundaries between the systems. Still collaboration between the different kinds of healthcare providers has increased and further cooperation is hoped for the future.

**Avainsanat- Nyckelord-Keywords**
- medical anthropology
- indigenous people
- Mentawai
- Indonesia
- Siberut
- health care
- pluralism
- biomedicine
- traditional medicine
- shamanism

**Säilytyspaikka- Förvaringsställe- Where deposited**
Muita tietoja- Övriga uppgifter- Additional information