

BRIDGING THE SOCIAL-BIOMEDICAL DIVIDE: UNCOVERING EXPLANATORY CONFLICTS IN THE PUBLIC HEALTH LITERATURE

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INTRODUCTION

Philosophers of science have paid significant attention to monism, the conviction that there is a single salient explanation for a given phenomenon in the natural world [1]. Monism can cause research programs to ignore or discredit alternative scientific understandings by creating competition amongst diverse research programs to come up with “the right explanation” for a given phenomenon. As such, monism erects a barrier to interdisciplinary research and intellectual plurality [1]. The diversity of academic areas and the growing impetus to pursue interdisciplinary research within public health makes monism a potential issue in the discipline [2]. To date, no study has sought to systematically characterize monistic conflicts in public health research, specifically disagreements between the social determinants focused “Social approaches” and the medical model based “Biomedical approaches”. This qualitative study seeks to fill this gap in the literature by uncovering instances of monistic conflict between the Social and Biomedical approaches in public health literature, utilizing childhood obesity as a case study.

METHODS

The present project was a narrative literature review of systematic and review articles on childhood obesity in North America, using the narrative literature review method described by Aveyard [3]. Systematic searches of CINAHL, MEDLINE and the Cochrane Database of Systematic Reviews were used to retrieve the records for the study. All records were assessed using thematic content analysis, facilitated by the use of Atlas.ti analytical software [4]. Content analysis was semi-deductive, using a pre-existing thematic framework to categorize instances of monistic language within the sample of articles while allowing themes to emerge from the data.

RESULTS

Analysis of articles indicated that monistic thought was present within the childhood obesity literature. Monistic language within the literature took the form of omissions and intra-disciplinary statements, with both social approach and biomedical approach researchers focussing their explanations firmly within their theoretical paradigms. The most interesting

form of monism discovered in the analysis was the use of re-contextualization to monistically alter the meaning of theoretical terms. Biomedical articles regularly repurposed social approach terms and concepts to fit biomedical explanations, a practice indicative of explanatory monism. This phenomenon was not found within social approach articles, which instead tended to judge biomedical explanations as incomplete or narrow, altogether ignoring sentient factors affecting the childhood obesity epidemic in North America.

DISCUSSION AND CONCLUSIONS

The present study has illustrated that monistic thought does exist in at least part of the public health discourse. Furthermore, it has shown the subtle and entrenched way monistic thought can manifest itself in the public health discourse. Consequently, the result of the present investigation suggests that monism not only hampers the theoretical integration necessary for interdisciplinary collaboration, but is hard to pinpoint and address. Further research is needed to assess how such philosophical assumptions can preclude effective theoretical integration in interdisciplinary research.

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