

## TOWARDS AN EFFICIENT PRACTICE IN MEDICINE: THE CONTRIBUTION OF HUMANITIES AND SOCIAL SCIENCES TO HEALTH SCIENCES.

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The nature of practice in the health profession goes beyond technical intervention alone, it encompasses the humanistic dimensions; relationships, interactions, emotions...etc. It calls for skills that transcend the technical domain. Curricula and study programs in the health sciences suffer from a sheer lack or even absence of training in the Humanities and Social Sciences (HSS) such as history, philosophy, sociology, anthropology despite their importance in the exercise of health professions.

### **Absence of social sciences content in university curricula for health professionals**

In Moroccan universities of medicine and pharmacy, the teaching of HSS is very timid and does not contribute to the selection of future health professional students; what is more, these institutions have very little cultural diversity internships, if any. Teaching is not uniform because each faculty adapts its own strategy and its own approach based on the means at its disposal. As it happens, the faculties of medicine and pharmacy do not systematically recruit teachers specializing in the HSS.

In Morocco, many individuals still entertain magico-religious and mysterious constructions or understandings of nosologies. Traditions, habits and rituals of populations still play an important role in thinking about health and illness. [1]

Restoring health and curing disease is a mission that falls within the realm of health sciences, but health and illness are also values and norms that are approached differently in different cultures and

societies. The definition of health is a difficult undertaking which shows how cultures and socio-cultural representations intersect to describe it without arriving at a global and monosemic definition that is valid in different cultures. The concept of illness is no exception, it is considered as a deviation. But, through what norm should we understand this as a deviation? Dr. Georges Canguilhem, in his thesis entitled "the normal and the pathological", had clearly pointed out the socio-cultural borders, between the norm "health" and the deviation "pathology" [2]

### **The relevance of the social sciences in the practice of health professions**

Health professionals are faced with an exercise that is increasingly contextual. The rapidly expanding and evolving new rights of health services users call for a holistic approach to dealing with patients and their environment through an increasingly horizontal and interactional communication style. The informational process has become an essential component of healthcare. Hence, the medical care must adapt to the socio-cultural specificities of the health system users. The patient-health professional relationship is dynamic and depends on the patient who belongs to different social groups. This creates different identities with socio-cultural constructions of the phenomena of health and illness, giving rise to heterogeneous social representations which professionals are invited to take into account [3]. Providing care to patients cannot be complete without understanding their identities, their

environments, the factors that extend their rationality and the meaning they give to their actions. This is why a deconstruction approach through the lens of the human and social sciences proves to be very useful in the training of health professionals.

All health and illness phenomena are constructed based on two main knowledge mechanisms; professional scientific knowledge and common-sense secular knowledge. The lack of good articulation between these two types of knowledge makes most public policies, in particular health policies, not very applicable and the wished-for results below expectations. In our view, the lack of knowledge regarding the socio-cultural context of both individuals and institutions is the main cause of this failure.

In their reflection “The practical culturalism of public health: criticism of a common sense”, the anthropologist Didier Fassin and Doctor Dozon JP, highlight the importance of integrating the cultures of populations in the design of public health policies. [4]

#### **Relevant HSS perspectives and link with Health Sciences: [5]**

Several themes of the human and social sciences intersect with the health sciences, such as social inequalities, gender, precariousness, immigration, social representations, communication...etc.

The choice of therapeutic remedies, therapeutic non-compliance, and health education among others, are obstacles encountered by health professionals in establishing and achieving their therapeutic objectives. These problems are largely due to phenomena of socio-cultural construction. We cannot achieve the objectives of health policies without knowing the patients who are actors with a rationality and reasoning that influence the expected results of professional practice.

The professional may believe that he is the sole actor and that the other parties are peripheral agents. The social sciences will allow professionals to deal with several equally important actors in the management of health and disease for a more inclusive approach. The late professor Elharouchi, among other eminent doctors and professors, was sensitive to this socio-cultural approach that future doctors have yet to assimilate. Hence, many were exhorted to visit the rural villages where they were sent for an internship or an assignment as part of their training. Paying attention to the language of patients and to the meanings they give to nosological entities makes it possible to integrate the singular aspect of their

patients' experiences through a precise analysis of their speech. Thus the doctor's judgment becomes based on active listening and on socio-cultural analysis of the patient to provide adequate responses on the relational and subsequently medical and therapeutic levels. [6]

#### **AS A CONCLUSION:**

Knowledge relating to health and illness in cross-cultural contexts expands beyond biomedical conceptions of disease as well as professional representations and therapeutic models of stakeholders, through the contribution of HSS concepts and contexts are approached concomitantly. The HSS offer practitioners of modern medicine, a more comprehensive definition of health as well as therapeutic approaches that take into account the socio-cultural context of the care delivery process and the principles of social reintegration that respect the phenomenological universe of patients as well as the expectation systems of broader social universes.

Health sciences will gain in efficiency if they transcend the patient's body to encompass the man as a holistic human experience in order to formulate common and sustainable actions understood by both parties.

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