

Barros NF. The Social Sciences in Medical Education. São Paulo: Hucitec; 2016.

Otacílio Batista de Sousa Nétto ¹
Franklin Delano Soares Forte ²

¹ *Departamento de Patologia e Clínica Odontológica, Centro de Ciências da Saúde, Universidade Federal do Piauí. Teresina PI Brasil.*

² *Departamento de Clínica e Odontologia Social, Centro de Ciências da Saúde, Universidade Federal da Paraíba. João Pessoa PB Brasil.*

The 185 pages of the book entitled “Ciências Sociais na Educação Médica” (Social Sciences in Medical Education) by Nelson Filice de Barros¹, published by Hucitec in 2016, follows a story of progress - the interface of social sciences in the field of medical education in Brazil, and its scientific and political horizon.

The author is a professor at a traditional medical school in Brazil, who has a long career in teaching social sciences, almost for as long as the medical school, established in 1963, has existed. As a social scientist, he deeply addresses the questions that permeate the book: what social sciences want, can and do contribute to medical education. The answers, and at times the rationale, developed throughout the text are not always clear or easily captured.

The central argument in the book shows the path undertaken by different generations of social scientists in teaching graduate and undergraduate courses in health science schools in Brazil. The author starts out by questioning the sociology of the practice and the ambivalences experienced by a sociologist in medical education, and his relationship with the objects of study, between the need for action itself, and the preeminence of reflective theorization of what is lived and taught. The comments that result from observing the path of social sciences in medical education show mutual dialogs, transformations, translations and negotiations.

The first chapter puts into context the origin of the “Brazilian” tradition of teaching social sciences in health education. This history shows the importance of the materialistic theoretical-conceptual matrices (Marxist), hybridized with the French (Canguilhem, Foucault and Boltansky) and American (Chicago School: Parsons, Freidson, Merton) influences. The author recognizes that at the limit, social sciences in the field of health have been marked by more political than actually scientific postures, and by a deliberate cooling of the principle of scientific neutrality. Questions associated with academic credentials,

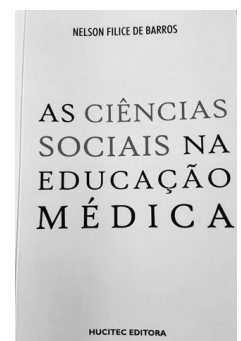
cultural market reserves, and disputes over the monopoly of knowledge are also discussed.

In chapters two and three, the book shows the centrality of the work done by social scientists to identify, name and analyze social contradictions. It is dedicated to the ingenious articulation of the notions of credentials and knowledge, focused on the presence of social sciences in medical education, theoretically building what would be the ideal Weberian type of relationship as a conceptual tool to design patterns and help with analytical comparisons. A credential is understood from different theoretical references, such as the power of social sciences in the field of health to exist in a territory of disputes, and power revealed in terms of technical, political, cultural and symbolic capital. Knowledge means the concepts, methods and techniques produced in theoretical constructs for research in health. The ideal type, therefore, should have strong credentials and knowledge. However, soon after the author ponders that, in his fifty years as a social scientist in a medical school, the concrete achievement is limited to a combination of poor credentials (primarily because of the small presence (in absolute numbers) of social scientists at health teaching and research institutions), and strong knowledge (quantity and value assigned to the output).

In a review of the relevant literature, this book shows the changes and reforms in medical education curricula in the 20th and 21st centuries, from the influential Flexner Report in 1910, to conferences on teaching social sciences in medical school in central countries and then in Latin America, with seminars held in Viña del Mar and Tehuacán (in the 1950s), as well as the Brazilian Health Reform and the ideological construct of collective health. These facts contributed to the subsequent creation of departments of preventive and social medicine, and hiring social scientists as faculty.

In the set of legacies enabled by social sciences in medical education, this book describes one trajectory in perspective - a self-absorbed, strictly theoretical-conceptual start problematizing the objects of health sciences, followed by gradual achievements such as enabling the presence of family members on-site in real-case health services scenarios, not only from a strictly clinical point of view, but in the concept of reassigning meaning to the practice of medicine, putting on the agenda and practice the complex and challenging social nature of the health-disease-care process.

Social sciences as a required discipline in the medical school curriculum, backed by the National



Curriculum Guidelines calls for a professional profile with the competences, attitudes and skills for expanded understanding of the health-disease-care process. On-the-job training, with a particular focus on primary healthcare, but also other scenarios of the medical practice. Integration of teaching-service-community, building critical autonomy, a profile of activity based on valuing differences and cross-cultural differences. To achieve this range of contributions, this book notes the long path underway, with streams, counter-streams and escape routes.

In chapter 4, the author triangulates reflections on teaching social sciences in Brazilian medical schools, the background of the relationship within the university at which he teaches, and data from a survey of faculty and students at this same institution. It finds and lists the existence of numerous inconsistencies between the almost consensually recognized importance of social sciences in medical education, and the timid interest it provokes. Furthermore, he speculates that this phenomenon is not recent, and may have always been present in the history of teaching social sciences in this and other medical schools.

The author considers that, in this unique experience of social sciences in medical education, there is no interchange of knowledge or science within varying degrees of tension, with reciprocal attempts and coopting and making invisible, and finally, fights for hegemony. The search for responses to the initial question in the book (what social sciences want, can and do contribute to medical education?) follows and includes creating an effective dialogic relationship, a socially valued

movement that recognizes the power of socio-medical knowledge, and its contributions to the non-self-limited and self-sufficient universe of health sciences.

The book encourages a reflection of what might be concerning, interpreted as a fact - increased adoption of a more applied or instrumentalized, and progressively less critical-reflexive of social sciences in medical school. Merely a spot approximation, responsive to pragmatic questions regarding the professional training in question. State-of-the-art in contemporaneity imposes losses, secundarization and devaluation of the profound substance of social sciences, transfigure into a mere input translated in the metaphor of using concepts such as the use of cotton in the wound dressing room.

In the end, contradictions mark a trajectory of social sciences in medical education, and define its potential and limits, such as the almost-stigma label of “us and them”, the presence involved by absence, the evidence of a structuring function and the extension of a script that while long-lasting, remains inconclusive. How do social sciences and health sciences communicate? The response is not ready, and invites reflection on the imaged and controversial presence of social sciences in the life and curriculum or medical education in our diverse and plural classroom.

References

1. Barros NF. *The Social Sciences in Medical Education*. São Paulo: Hucitec; 2016.