CHAPTER 1

Context and Thinking

SUSAN SHAW

CHAPTER OVERVIEW

This chapter covers the following topics:

- Tools for critical thinking
- The cultural lens
- The social lens
- The gender lens
- The political lens
- The moral lens
- The media lens

KEY TERMS

Critical thinking Health literacy Information Institutions Oppression Perspectives The volume of information and accessibility to it are defining features of the age in which we live. We are surrounded by vast amounts of knowledge in the form of opinions, facts and ideas, and they are available to us in many formats including visual images, advertising, internet content, writing, conversation and art. Much of this information crosses our path whether or not we seek it. This abundance of knowledge sets us apart from previous generations when information was often only available through experts (such as health professionals) or other designated members of society (such as priests), who were considered to be entitled to translate it and pass it onto others. A dramatic increase in literacy means that the general public can access and understand information that may previously not have been available to them. The internet provides access to vast amounts of content, which can rival the expert information that professionals once had, and social media enable easy access to opinions and perspectives. Access to knowledge no longer sets experts apart from the rest of the population. The power that knowledge affords is no longer the domain of the privileged few. However, access to such a range of information brings with it new challenges, such as judging the relevance, quality and appropriateness of it, as well as the motivations of those who created and posted it.

Official messages that are developed or condoned by government agencies provide a snapshot of how issues are perceived. These messages also reflect the media, language and values of the time. In the 1940s, the New Zealand government produced a range of pamphlets and flyers to inform the community about a range of public health issues. They addressed things such as abortion, smoking (see page 119) and general child health. Case study 1.1 presents what amounts to a public announcement about child health. It also provides a glimpse of the broader social and political context of the time. The importance of diet, sleep and fresh air and exercise in relation to general wellbeing has not changed. However, the messages attached to each of these concepts extend to information and advice that would not have the same profile so many decades later. The information about diet refers to foods that are not commonly appreciated today; the information about fresh air extends to sleeping with windows open, which could be considered unsafe or irresponsible now; and sunshine is no longer considered completely positive, as public health messages now focus on protection from the sun as being necessary to maintain good health. The means of communication is also very different as there would be little currency today for a flyer presented under a government logo that encourages readers to 'keep this announcement for future reference'. Perhaps the fridge magnet is the new format for an official public announcement that people are likely to remember.

CHANGING IDEAS AND PERSPECTIVES

Knowledge and information about health and wellness is not static. It evolves over time and reflects attitudes, values and perspectives of the wider society.

Figure 1.1: How is your child?



Source: New Zealand Department of Health 1945 (eph-b-health-nzdh-1945-04[1]) reproduced with permission from the Alexander Turnbull Library.

NATIONAL IDENTITY

Aotearoa New Zealand is physically isolated, yet has much in common with other nations. It is this blend of distance and similarity that converges to create a unique environment and a particular view of the world.

KIWI CULTURAL CHARACTERISTICS

Pioneering

Settling in a pristine land required hard work, innovation, vision and commitment. Translated into modern times, this is reflected in the image of New Zealanders being rugged, determined and innovative.

Hardworking

This image represents New Zealanders as overcoming barriers (social, physical or natural). They traditionally have little regard for disputes that are based on fine distinctions between roles, preferring to 'roll up their sleeves' and get on with the job with minimal fuss.

Fair

The fundamental belief that everyone is equal and should be treated fairly (egalitarianism) is widely held. This probably stems from a contrast between the environment that settlers from the United Kingdom left behind in the nineteenth century and the new environment in which they found themselves. Part of the attraction of New Zealand was the lack of a social hierarchy and the chance to create a new and fair society.

Optimistic

The positive kiwi disposition is evident in the common phrase 'she'll be right', which encompasses the belief that there is no point in worrying unduly about things because they can usually be set right.

Unassuming

Many innovations and inventions that have made a difference to the world have come from Aotearoa New Zealand. Generally these kiwis have maintained relatively low profiles. There is a national perception that people should keep a low profile and dislike 'tall poppies' (those who stand out from the crowd).

Innovative

The innovative streak has been referred to as 'backyard genius' meaning that people do not need impressive resources to do amazing things. Reference is also often made to 'number 8 wire', meaning that with the right type of fencing wire resourceful New Zealanders can make whatever it is that they need.

CASE STUDY 1.3

Fortunate

There is a good deal of pride associated with the 'clean and green' environment. The bounty of the land is associated with the history of New Zealand providing agricultural produce for the British Empire. The land is viewed as life-giving, young and vibrant, and there is an expectation that it deserves to, and will, be treated with respect.

Competitive

Representative teams from this small nation compete on the international stage in a number of sporting codes.

TOOLS FOR CRITICAL THINKING: THE LENSES

The characteristics of a society can be analysed in many ways. Art, language, history, architecture, poetry, legislation, culture, war, industry, human rights, transport and infrastructure are all elements of society that can have an impact on the wellbeing of people. The development of them in any given time or place can provide insight into what a society values and wishes to associate with, and how it defines itself.

MAKING SENSE OF INFORMATION

Understanding the way we think can help us to find ways to process and analyse information. There are many ways of thinking about and processing information. Some of them are outlined below:

Patterns of knowing

Over a period of almost twenty years (1978–1995), two nurses suggested that there are patterns of knowledge that apply to practice (Carper, 1978; White, 1995):

- empirics
- ethics
- personal
- aesthetic
- sociopolitical.

These five 'ways of knowing' provide a useful tool for organising and considering information.

Reflection

Many people have analysed how practitioners think, often debating the extremes of rationality and intuition (Easen & Wilcockson, 1996). Attending to what we know, what we have done and what we are doing is a useful way of organising information—which also supports the development of professional practice:

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Whether in its verbal or nonverbal mode, reflection-in-action is centrally important to the artistry of competent practitioners, such as athletes, musical performers, teachers who try to make on-the-spot sense of their students' unexpected questions ...

(Schon, 1992, p. 125).

Thinking in colours

Edward de Bono (1995) emphasised the importance of creative thinking and suggested 'six hats', each linked to a different colour:

· White hat: facts and figures

· Red hat: intuition, feelings and emotions

Black hat: logical negativeYellow hat: logical positive

Green hat: provocative and alternative

Blue hat: overview.

Sheila Glazov (2007) published a book entitled *What Color is Your Brain?* which presents a more light-hearted way of thinking about how people think and respond:

· Yellow: responsible, organised, loyal and punctual

• Blue: creative, communicative, helpful and compassionate

· Green: logical, private, competent and independent

• Orange: dynamic, funloving, generous and courageous.

Animal characteristics

There are a number of human stereotypes that relate to characteristics from the animal kingdom. For example, Chapter 2 describes the characteristics of doves, owls, peacocks and eagles in relation to human behaviour.

Critical thinking is neither instinctive nor natural (indeed, it deliberately runs against conventional trends and received wisdom), and so it makes sense to draw on some tools to help us see more clearly and think more critically. The following section sets out some common tools, or lenses to assist with critical analysis of health and healthcare practice. Asking the following questions enables a more in-depth understanding of issues and concepts.

The cultural lens

The cultural lens encourages us to recognise cultural practices and objects, ideas and beliefs in ourselves, and in the people we work with and for. It also prompts us to see that we operate within particular cultural contexts, and that the **institutions** and buildings we operate in, and the systems and procedures we promote, are cultural objects in their own right that should be analysed for the way they encourage certain ways of thinking and

discourage others. Culture is not merely a question of ethnicity, but also spirituality, age, gender and sexual orientation. Using a cultural lens can help us remember that the assumptions we make, based on our culture, may be looked upon as very strange by people from other cultures. Therefore we should always be attentive to the cultural assumptions we make in our day-to-day practice.

Key concept: The impact of cultural practice, objects, ideas and beliefs in society.

QUESTIONS

What is meaningful to people?

What is sacred?

What do people value and what do they reject?

How do we define normal?

Will this offend?

Will this be valuing?

Does it encourage diversity?

Does this demonstrate understanding?

What about protocol?

What do taken-for-granted norms tells us about our cultural assumptions?

The social lens

The social lens recognises the importance of structural influences, such as unemployment, low educational attainment and poor living conditions, as major influences upon people's health and wellbeing. The social lens encourages us to explore the social structures and institutions that influence how people are defined, categorised and labelled, and what effect these labels have upon the incidence and prevalence of illness, access to services and health literacy.

Key concept: The impact of social structures upon society.

QUESTIONS

What institutional structures exist?

What forms of resistance are present?

Why do differences exist?

Who benefits?

Who is missing out?

Who has power?

What is the cost to society?

How are societal differences justified?

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The gender lens

The gender lens encourages us to investigate the extent to which gendered social practices underpin our experience of health and healthcare. Like the social lens, the gender lens concentrates on the structural assumptions that underlie our understanding of health. Attitudes towards women as carers, for instance, affect policies on informal care for infirm elderly, as well as the pay and conditions of female-dominated caring professions. The gender lens attempts to bring gendered assumptions to the surface and challenge them.



QUESTIONS

What are the gendered assumptions that exist?

Where are androcentric (male-orientated) views dominating?

What forms of resistance are present?

How would society operate differently without an androcentric bias?

What is the gendered perspective on this issue?

What would an alternative view be?

Why is information conveyed in a gendered way?

Whose interests are served by gendered policies and procedures?

The political lens

The political lens suggests that we all play a part in political decisions that affect the organisation of our services, the types of support offered to the community and the organisation of healthcare systems. The political lens asks us to examine how we are situated when we operate as practitioners, and how this changes when we, as individuals, revert to being citizens and patients. We are encouraged to explore our role as advocates, catalysts and agents of change, and ask whether the political system that protects us serves society well. It asks us to view **oppression** and dominance politically, and to explore the effect these have upon our disenfranchised, vulnerable and politically marginalised clients.

Key concept: The impact of policy decisions and political power on society.

QUESTIONS

What is the rhetoric?

What is being said and what is not said?

Who is being protected?

Who is vulnerable?

What policy exists?

Why was it not always so?

What is the underlying political ideal?

The moral lens

The moral lens explores questions of right and wrong. It brings to the surface the shifting historical values that have affected society over time. Traditional values are challenged by new ways of deciding on the best course of action. The moral lens explores not only the process of ethical decision-making, but also questions how this framework operates, who it privileges and how it gains support. In healthcare, a moral lens helps us to analyse processes of decision-making, and encourages us to make critically informed judgments about what we perceive to be right and wrong.

Key concept: The impact of judgments about right and wrong.

QUESTIONS

How are decisions arrived at?

Who is making the decision?

On what basis is the decision made?

Who is right?

Who is wrong?

What is acceptable?

What is just?

What is proper?

The media lens

The media lens poses questions about information and how it is presented to us. It encourages us to remember that in today's modern and technologically advanced era decisions about what we see and hear are made by many different people. Rarely do we receive information about the world in its raw state; we are exposed to reportage, opinion and imagery that are both biased and potentially misleading. Our task is to see the story and the context in which it was produced.

Key concept: How the media presents the world to us and impacts on our thinking.

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QUESTIONS

How is this being presented?

What is the bias?

Who does this point of view belong to?

What other points of view are there?

How would I find out about other perspectives?

SUMMARY

Appreciating context enables practitioners to understand the broad social, political and cultural environment in which they work and interact. It is important to develop a critically reflexive attitude to practice and to be aware of the limitations of a purely scientific perspective. Professional practice demands more than technical skill; it also requires the ability to relate to people. Some lenses have been suggested as tools for critical reflection and exploration of these issues.

FURTHER READING

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