# **Letters**

# No quick fix for social science in public health

Editor – The perspective piece by Williams et al. on the contribution of social science to malaria control reveals the predicament of many social scientists working in public health (1). The authors correctly point out that social scientists want to adopt a theoretical and critical approach, but that such research would not be deemed useful for programmes. They have not found a way out of this predicament, however.

Funding strategies have produced a proliferation of social science studies in the health field. The most common of these are the 'quickies', often conducted by non-academic organizations (in many cases nongovernmental organizations) for funding agencies and academic and research institutions. 'Quickies' may have a utility value but they certainly reduce the value and orientation of social sciences. The most disturbing trend in the 1990s was the virtual dominance of economics in the research agenda of social sciences. It appears that studies on malaria control, tuberculosis or HIV/AIDS focusing on anthropological or social dimensions

are less likely to be funded than those dealing with economic issues.

Social sciences in health are like the six blind men examining an elephant: they have contributed to utterly misleading conclusions, for instance by overplaying issues such as stigma, superstition or cultural resistance while underplaying structural or institutional factors. Such contributions have also moulded the highly patronizing health education components now common in disease control programmes.

Social scientists have come a long way to be thinking about a transdisciplinary approach, and it may get them out of their predicament (2). But isn't it time to think about a paradigmatic change towards social sciences in health, instead of persisting with worn out concepts of medical anthropology, medical sociology, health psychology and so on? (3)

## K.R. Nayar<sup>1</sup>

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- Williams HA, Jones C, Alilio M, Zimicki S, Azevedo I, Nyamongo I, et al. The contribution of social science research to malaria prevention and control. *Bulletin of the World Health Organization* 2002;80:251-2.
- Sommerfield J. Medical anthropology and infectious disease control (Editorial). *Tropical Medicine and International Health* 1998;3: 002 A
- 3. Nayar KR. Social sciences in health: towards a paradigm. *IASSI Quarterly* 1993;12:153-9.

### **Erratum**

In "In this month's *Bulletin*", p. 426 of Vol. 80, No. 6, second column, second paragraph, the statement "nearly three-quarters of the population are infected with HIV and the bacterium which causes TB" should read "nearly three-quarters of the people in the world who are infected with HIV and the bacterium which causes TB live in this region".

<sup>&</sup>lt;sup>1</sup> Associate Professor, Centre of Social Medicine and Community Health, Jawaharlal Nehru University, New Delhi 110067, India (email prior to 31 August 2002: nayar@urz.uni-heidelberg.de).