Theory in Health Promotion Research and Practice

Thinking Outside the Box

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Dedication

This is dedicated to my father, Rev. Curtis C. Goodson, and his wife, Elisa G. Goodson, with much love.

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Preface

It never fails. Every time I begin teaching a health behavior theories course before students have had a chance to learn what theoretical thinking entails—I hear the familiar mantra: "*But, Dr. Goodson, theory is sooooo boring, sooooo dry, and sooooo abstract!*" (with lots of emphasis on the "so" to make sure I don't miss the point). Despite their preconceptions that learning health behavior theories is as enticing and exciting as hiking through the Saharan desert in the middle of a sand storm, they concede, rather reluctantly at first, that theory may be a needed (often required) tool for health promotion. If so, then learning how to use it *might*, indeed, be valuable. Yet mastering this tool seems as unattractive a task as undergoing brain surgery (or any surgery, for that matter).

It is for readers who identify with such prejudices against theory, who believe theory is dry, boring, and unappealing, that I wrote this book. Because I do understand why people might think this way about theory (yes, I concede: theory *can be* a horribly abstract and unattractive topic), I wrote *Theory in Health Promotion Research and Practice: Thinking Outside the Box* as a different kind of theory book. Because I wanted readers to actually enjoy reading about theory, this book *had to be* different.

What, then, makes this text unique? First, it does not describe any particular theory or sets of theories used in health promotion research or practice. I wished to avoid the book becoming a mini-encyclopedia of theories, for plenty of such resources are readily available. I even present and assess some of these resources within the text (see Chapter 4).

If it does not describe individual theories then, what is the book *about*? The answer to this question is rather simple: The book centers on a *challenge*—a challenge I propose to you, the reader and health promotion professional (or professional-in-training), to develop your theoretical thinking skills in order to impact the field, improve people's health, and foster professional growth. Across all chapters you will

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find a constant, repeated call to think theoretically, to develop your own theoretical frameworks, to fill in the current theoretical gaps, and to enjoy yourself in the process! This is, most certainly, the main purpose of this book—its "soul."

More specifically, Thinking Outside the Box is about the need for and the importance of *thinking theoretically* about health promotion and public health. Chapters 1 and 2 define theory and develop a rationale for why thinking theoretically is vitally important for the health of our field (very frequently, I will use the labels "health promotion," "public health," and even "health education" interchangeably, despite their inherent differences). Chapter 3 reviews how health promoters (scholars and practitioners) have handled theoretical thinking and the application of theory to research and practice in recent years (or not). Chapter 4 introduces you to the available textbooks describing the various health education and health behavior theories currently employed in the field (the mini-encyclopedias I mentioned previously). The chapter exposes you to the theoretical landscape that our health promotion efforts now inhabit, and offers to take you through a *theoretical-thinking journey*, critically assessing the most popular theories we employ in public health research and practice. The journey takes you through Chapters 5, 6, and 7, pointing to three important problematic patterns in the current landscape: current theories' exaggerated focus on individual-level factors, their undue emphasis on rationality, and their deliberate privileging of linearity.

Before you begin to fear *Thinking Outside the Box* might just be a heavy-handed critique of the theories currently deployed in health promotion, I remind you of the book's main title: *Theory in Health Promotion Research and Practice*. That is precisely the topic I address in Chapters 8 and 9, providing guidelines for *applying* theory (yes, those same theories I critique in Chapters 4 through 7) to health promotion research (Chapter 8) and to program planning and evaluation (Chapter 9). Keep in mind: In Chapter 8, you will find step-by-step guidelines for applying theory to the three most-often employed research paradigms in public health—quantitative, qualitative, and mixed-methods research. If, for some reason, you picked up this book merely to learn how to *use* theory, you may want to read Chapter 1 (for the overall "tone" of the book) and skip to Chapters 8 and 9 (and Appendices A and B) to get to the procedural steps.

In Chapter 10, you will find "outside-the-box" recommendations for bridging the gap between theory and practice in public health. Appendix A provides a brief overview of the distinction between *theory* and *model*, and in Appendix B, I offer brief guidelines for how to develop your own theoretical thinking, and how to evaluate the quality of a new (or even an "old") scientific theory.

PREFACE >

Thinking Outside the Box is a different kind of theory book not only due to its content. It is different because it proposes a unique way of thinking *about theory*. In this text, I argue that thinking theoretically is essential for reflection about one's practice and is, therefore, a type of practice itself. I also make the case for theoretical thinking as narrative, for theories as stories, and for theorizing as a form of story telling. These notions—that theory is practice, that theory is a form of narrative-are not new. Yet they represent an uncommon approach to theoretical thinking, one that sits at the margins of the current scientific discourse in public health, one you will not encounter very frequently in public health's arsenal. While these perspectives may currently lack widespread popularity, I believe them to be the most interesting (not boring), attractive (not dry), and effective (not irrelevant) approaches for helping to understand the professional dilemmas we face and the many frustrations we encounter when dealing with human beings, their well-being, and dis-ease. I encourage you not to be deterred by the nonmainstream status of some of the perspectives I introduce; after all, that's what thinking outside the box entails-becoming part of a minority group of thinkers.

To support the unconventional approach I bring to this book (yet I must remind you that the approach is unconventional mainly in public health, not so much in other fields), I relied heavily on the authors who have shaped my own theoretical thinking. I attempted to reflect their views through my own lenses of personal and professional experiences. Among those who influenced my approach to theory and theoretical thinking, the Brazilian educator and philosopher of education, Paulo Freire holds a prominent place (partly because I had the privilege of hearing him speak several times at conferences in Brazil and was fortunate to have been mentored by a couple of his closest pupils—one of whom became Freire's biographer). For those unfamiliar with Freire's work, it may suffice to know that he is viewed as the "father" of empowerment theories in health promotion.

I agree with Freire's basic premise that education is a powerful transformational tool. If I didn't believe this, I wouldn't have chosen *health education* as a career. Yet it is his specific formulation that education is a *dialogical process of action and reflection* that became the foundation of my thinking about health promotion research and practice. For Freire, all education occurs within a process of dialogue between free human beings. In this dialogue, humans exchange and create meaning (or *teach-and-learn*) by "naming" the world around them. The words used in this naming process come from the work (or praxis) that humans engage in, work they do to transform and manage their world. This work consists

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necessarily of two dimensions: reflection and action. These dimensions interact so radically, claims Freire (1974), that "if one is sacrificed—even in part—the other immediately suffers" (p. 75). When, in human praxis, action is sacrificed, what results is *idle chatter*, *verbalism* or, as Freire would say, an "*alienating 'blah*." Conversely, if reflection is compromised, human action turns into *nervous activism* and shuts down dialogue. In other words, too much action—without reflection—is nonceasing activity without room for meaningful dialogue; too much reflection—without corresponding action—becomes empty babbling and has no transformative power (Freire, 1974). According to Freire, in our educational and knowledge-building efforts, we are constantly tempted to break up this reflection—action unit and to dichotomize (and polarize) the two dimensions. Such dichotomy—established in most disciplinary fields, including public health—between theory and practice, action and reflection, is concrete evidence that we have fallen into temptation. But more about that later in the book.

A third reason why this is a different kind of theory book is its writing style. Precisely because I believe education consists of an ongoing dialogue between teachers and learners, I opted to write this book using a "dialogue tone": I write the text, as much as possible, in the first person, something you will not find in most theory texts. Because I wished to maintain a conversational style and avoid some of the "dryness" of other theory texts, I tell several stories of my interactions with colleagues and students, their puzzled questions, their reactions, and their experiences applying theory (or not). I confess I received mixed reviews when a few students read the initial drafts of this book. Some asked that I avoid the "I" in the text; for them, using first person became too distracting and did not make the text sound "academic enough." "Stick to the facts and write academically" was their somber advice to me at that point, perhaps feeling an obligation to protect my career from abject disaster were I to continue insisting on writing informally. On the other extreme were the students who "absolutely *loooooved*" the personal, informal style and thanked me profusely for avoiding writing another text that might significantly increase the risk for a reading-induced coma. Go figure. Mixed reviews! As an academic, shouldn't I be used to them by now?

Backed by Robert Nash—and his text *Liberating Scholarly Writing: The Power* of *Personal Narrative*—I chose to err on the side of mixing "much informal writing with formal writing" (Nash, 2004, p. 6). Actually, I *had* to, you see, because this book defines, discusses, and assesses theory from the perspective of narrative, or theory-as-story telling. This approach compels me to write in a style that allows interspersing my own stories, inserting my own voice. Granted, I don't have *that many* interesting stories to tell related to theory; so I did break down and "stuck

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to the facts" at least 90% of the time. Yet you will catch me breaking the rules of academic discourse quite frequently in each of the chapters. I hope you won't charge me with academic mutiny and will instead become motivated to explore what Robert Nash calls "scholarly personal narrative" (SPN). Nash defines SPN as a form of intellectual inquiry that advocates, for the inquirer, the author, or the researcher, the right to be placed *inside* the exploration, to have his or her voice heard *alongside* the "mere facts" (Nash, 2004, p. 4). I strongly believe in the intrinsic value of this type of inquiry.

This text was written for graduate students and junior professionals who work directly with or have a tangential interest in human health and well-being, public health, and health promotion; students in schools of Public Health; in departments of Health Education, Human Behavior and Performance, or Health Promotion; within colleges of Education or Health Sciences; and those enrolled in human health behavior-related studies in Anthropology, Sociology, Psychology, Political Science, and Social Work (among other fields). I believe the text will also be useful for public health professionals who might feel twinges of frustration every now and then regarding the prosaic theoretical direction in which the field seems to be headed, who wish to contribute new perspectives and approaches, who wish to think "outside the box" yet not feel completely alone or unvalidated in the process. Ultimately, this book can represent a source of solace and direction for anyone wishing to navigate the theoretical waters in the social sciences.

If you find the text helpful (or even if you don't) and wish to share your comments, provide feedback, ask questions, or recommend changes, you're welcome to email me at *TheoryDoc@gmail.com*. I look forward to hearing from you.

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Freire, P. (1974). Pedagogy of the Oppressed (M. B. Ramos, Trans. 10th printing ed.). New York: The Seabury Press: A Continuum Book.

Nash, R. J. (2004). Liberating Scholarly Writing: The Power of Personal Narrative. New York: Teachers College Press.

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These are the villagers who helped make this book a reality. They are worthy of thanks and recognition, but are not responsible for any mistakes or idiosyncrasies I may have brought to the text. Together, we would like to invite you to be a part of this village and to come stay awhile and commune with us as you read. . . . We are thankful you chose to visit. We hope you enjoy your stay.

Patricia Goodson College Station, Texas TheoryDoc@gmail.com

¹I created P.O.W.E.R. services, in 2007, as a peer-led service to support doctoral students' writing efforts in the College of Education and Human Development at Texas A&M University. P.O.W.E.R. stands for Promoting Outstanding Writing for Excellence in Research.

About the Author

Patricia (Pat) Goodson, PhD, is a Professor in the Department of Health & Kinesiology at Texas A&M University, where she has taught many of the graduatelevel health behavior theories courses during the last 10 years. She obtained her PhD in Health Education from The University of Texas at Austin (thankfully, Texas Aggies do not hold that against her!). She holds one master's degree in General Theological Studies, awarded by Covenant Theological Seminary (in St. Louis, Missouri), and another one in Philosophy of Education, from the Universidade Catolica de Campinas (in Campinas, São Paulo, Brazil). Dr. Goodson's bachelor's degree in Linguistics, her bilingual (Portuguese-English) and bicultural upbringing, and her interest in all things language-related have converged in the narrative approach to theory and to health promotion that she brings to this book. In addition to this text, Dr. Goodson has authored several publications related to her research interests in reproductive health, human sexuality, sexuality education, and public health genomics. You may contact Dr. Goodson at: *TheoryDoc@gmail.com*.