

## **An Introduction to the Necessity of Theorizing and Theory in Health Sciences**

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### **Introduction**

The most important feature of every branch and profession is for it to be “scientific”. Therefore, experts in all fields and professions try to present their information and activities based on science and knowledge and on the basis of scientific principles Theory. To this end, almost all experts have considered “theory” to be the most important feature of science. Theory is considered as the systematic definition of a specified phenomenon in which concepts, propositions, and rational and relevant statements describe, explain, predict and control a phenomenon. Therefore, theory is the fruit of the tree of knowledge and science. On this basis, Iran is amongst the developing countries defining and founding its programs and national development superior documents based on knowledge. The emphasis on and the prevalence of “knowledge founded economics” in recent times are influenced by this paradigm. Clearly, it proves to be true

about the health-related branches and professions. Rather, even the experts in this field, in parallel with their newest paradigm, consider the most important health-related index of professional practice to be “evidence-based practice” and specifically emphasize it. Despite this clear necessity, some may regard theory and theorizing a subjective issue that is far from reality and objective practice, and is a luxurious university activity having no relation with society and real society needs. There is not little of this look and consideration that can be due to their inappropriate mentality and definition of the concept and meaning of theory and theorizing. Firstly, theory (the major components of which are concepts and predicates) is as Kant argues the very organized understanding of phenomena. Therefore, the main essence of theory is understanding and thought. As a result, some consider theory as the systematic and formulated form of knowledge as a feature and

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characteristic of science. When a problem rises in daily activities of professional life resulting in a dispute, through naming or articulating and using some word for the conceived meaning, we transfer that problem and situation to others (conceptualization). This can be the beginning point for scientific theorizing. However, the reason why theories do not shape as simply as we explained here because we are accustomed to analyze, explain or solve every problem through the previous learned or known and stereotyped theories. This weakness or challenge can be traced back to faults and problems in our educational system that does not develop and flourish critical thinking as the essence and spirit of theorizing, teaching answers and their memorization instead of teaching questions and thinking. Moreover, another reason why some have a negative mentality and look towards theories and models is their superficial and preliminary understanding of different theories. In different and valued scientific resources, in terms of purpose, theories are divided into four descriptive, explanative, predictive and controlling or prescriptive categories. In terms of realm and limit, they are divided into the categories of Meta-theory, Grand Theory, Middle-Range Theory, and Micro/Practice Theory. Meta-theory includes philosophical theories, for example, on the nature of science and methodology of

knowledge production (the basis for research methods) that is the highest level of theory in terms of subjectivity. Negative look by some may be due to mere attention to this kind of theories. Grand Theory explains professional and intra-profession phenomena and issues. The category of Middle-range Theory concentrates on special intra-profession concepts and groups. The last category of Micro Theory concentrates on certain operations and activities, and is the most objective level of theories. In health sciences, these practical theories include healthcare protocols, procedures, and guidelines. Now, considering such a definition of theory, the question is if any professional engaged in the field of health sciences acts without theory and model?! Some may argue that professional and academic individuals pay attention to theory, teach it and research, and act based on it. However, they cannot and should not process and produce a theory. They should be told: "Who they think has produced, invented and presented these theories?", "Have the famous theories remained the same number?" or "Have there been infinite numbers of theories presented but not developed or known?" The reality is that theorizing is not a simple issue; however, it is not impossible for everybody, on the other side. The necessary requirement and the best tool for theorizing is hardworking thought, exact observations, and clear

explanations and definitions of phenomenon conceptualization and peripheral issues.

**Do all people have these potential and tools at reach?**

It is to be noted, however, that it is not an adequate requirement for beginners and those who try to evaluate and define a phenomenon or issue with a new look and through regulated and systematic strategies; rather theory processes are useful, conducive and available instruments to this end. Like any scientific activity, theorizing possesses systematic methods and features that should be learned and utilized. Unfortunately, in many health-related branches and sciences, especially in the degree of PhD, such discourses and methods are not considered in the curriculum, and their educational and research-based programs are based on old and imported stereotyped and known theories.

This fact has turned most of our researchers into mere consumers of available and others' theories and models while it is evident that many of health-related professional phenomena and issues depend on situation, and need to be theoretically explained and defined based on situation. Theories cannot even provide fixed definitions and control of phenomena through time because the situation and conception of the phenomenon and the issues and problems are not fixed, static and permanent things; rather they are mobile, dynamic and variable. Therefore, old theories and models in every field are criticized, their inefficiencies are shown, and new theories (as paradigm) are replaced. Hence, it is necessary that educational and research experts and policy makers pay more attention to the importance and necessity of theorizing and production of new and appropriate theories and models.