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## **EDITORIAL**

## Interdisciplinarity: conceptual and applicational questions

Knowledge production that exists "between" disciplines is the theme addressed in the articles of this edition of Texto & Contexto Journal. Reading these articles should reveal a conceptual diversity that, before all else, puts into question the significance of interdisciplinarity and in turn its possible academic applications. In this editorial, I have outlined some concepts, limits, and possibilities of interdisciplinarity in the health care field, using my own experience as a researcher in Canada and Brazil as background.

The motivating idea behind the interdisciplinarity movement is that of overcoming limits of the scientific disciplines in order to produce knowledge that permits the interpretation and answering of complex and multi-faceted situations (as the health and sickness situations can be within the context of Brazilian society, given the attention offered by the Federal Health Care System (*Sistema Única de Saúde*), and that can blend knowledge from genetics to economics). Yet in its wake is the proposal for solutions to problems based upon the fusion or integration of knowledge from distinct scientific disciplines, in order to generate knowledge that is more accessible to more groups or more applicable within varied contexts.

Some authors refer to degrees of interdisciplinarity, while others utilize distinct concepts for different types of articulating knowledge, shared in the elimination of disciplinary limits. Possibly the most utilized form of interdisciplinarity would be the **instrumental**, of which the academics of one discipline utilize methods or ideas from another to expand the possibilities of working in their own discipline. More complete forms of interdisciplinarity are the **conceptual** and the **epistemological** forms, which suppose the creation of a new field of knowledge that is not of the domain of a single existing or specific discipline or even the utilization of shared onto-epistemological suppositions. This is often the case in gender studies, which are frequently composed of academics from diverse disciplines who employ and produce theories which resonate and apply to various disciplines. Some of them might be nursing, education, or anthropology.

These variations are also conceptually conceived as multidisciplinarity, interdisciplinarity, and transdisciplinarity. Apparently, this last concept was coined by Piaget when he commented that one could expect that interdisciplinarity would be surpassed by a transdisciplinary system, without fixed boundaries among the disciplines (Report on the encounter *L'interdisciplinarité – Problèmes d'enseignement et de recherche dans les universités*, Nice, França, OCDE, 1972). Thus, the predicted movement would be disciplines that dialogue, followed by disciplines that produce common knowledge, until reaching the elimination of disciplines as they are currently known; achieving a proposal of a unit within diversity.

The search for overcoming the disciplinary bounds is justified by the partial and limited contribution that each discipline offers towards the comprehension and transformation of complex phenomenon. However, the practice of interdisciplinarity has shown itself to be difficult in its execution as well as a constant challenge for researchers. Two functional challenges that interdisciplinary research teams tend to face are the lack of a common language (via the absence of shared theoretical assumptions) and the long periods of time that the construction of such references require. As

productivity in universities generally is measured within disciplines, the accelerated rhythm that guides current academic production makes the development of truly interdisciplinary research teams more difficult. Added to these two challenges is the risk of not meeting the rigors of academic standards created by the transposition of theories from one discipline to another and the possible lack of depth. Knowledge that serves several fields can suffer if the proposal for interdisciplinarity does not extend beyond an academic method.

Understanding interdisciplinarity as an answer to complexity and to the challenge of concrete situations (for example, founding and simultaneously recreating theories on public policies, administration, nursing, medicine, and pharmacy in order to respond to a question of care) reveals a conception for knowledge production that is centered on onto-epistemological principles, identifying common fundamentals in order to advance with greater reach, and manifests a social commitment with knowledge that looks to offer answers to collective questions, whether for a greater understanding or for intervention. This proposal, however, can be conflicting with various elements that constitute the health care institutions. Academics need to prove yet further their consistency and effectiveness in order to face the disciplinary divisions in which we were and are still educated, and in which we were and are still educating. This collection of articles is one more step in that direction.

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