

# The Social Construction of Knowledge and Reality

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# **The Human Experience is Socially and Personally construed**

Socio-cultural and personal constructs are the ways communities and individuals construe their experiences at the emotional and cognitive level- Social and personal constructs are interacting and influencing all the time the social and individual dimensions.

What is perceived as **real** varies from society to society and is produced, transmitted and conserved through social processes.

Our perception of reality is largely modeled from beliefs and assumptions that are typical of the society and culture in which we belong. What we know, what we consider true and right, the behaviors we adopt, all are influenced by the social/cultural environment in which we live. This process happens through the internalization of a “reality” that occurs during the socialization process.

**In other words cultures, societies and individual construe the meaning of experience.**

**This is done through various processes that are reciprocally influencing each other**

**Example: Both brother and sister will be raised by a mother that is incapable of offering deep and reassuring contact; both children may develop an insecure relational style, but the culture in which they grow may evaluate differently the same trait, the same relational style may be considered socially acceptable for one of the gender and not for the other.**

This occurs largely without an awareness of that

*“The world of everyday life is not only taken for granted as **reality** by ordinary members of society in the subjectively meaningful conduct of their lives. It is a world originated in their thought and actions, and is maintained as real by these.”*

(Berger & Luckmann, 1966, page 19)

The concept of health,  
for example, is a social  
construct that it is  
closely correlated with  
the dominant culture

The anthropology and ethnography literature is full of examples of how different cultures at different times and places regard the human body

(Hufford 1992, Kleinman 1979).

Cultural beliefs regarding the body, health, and disease are often embedded in religious or spiritual traditions, which in turn may govern how diseases and disorders are regarded and treated.

## Example:

In the allopathic medical model of Western society the body is divided into organs with specific functions.

The body is seen as functioning well unless disease disrupts it.

Diseases in themselves are understood to be invariable across cultures.

The western medical model has traditionally dichotomized body and mind/soul/spirit—science and magic. The body seen as objective and value-free



- Other societies with different cultures hold views of the body strikingly different from the allopathic Western medical model.
- In some cultures, individuals and their health providers conceive of the body as the union of soul and soma.
- Illness may occur as a result of a "failure in harmony" or "an imbalance of forces."
- Schools of medicine in China, India, and other non-Western societies incorporate such principles into their teaching and practice (Hufford 1992).

The concepts of body or health as well as the concepts of what is honorable, desirable, correct and permitted etc. change from culture to culture and from period to period since the reality in which human beings live is socially and culturally construed.

(Berger and Luckmann, 1966).

**If a shared cultural belief is that gays, lesbians, and bisexuals are deviant and sick people, and their loving relationships are seen as sinful, we might see this pathologizing view mirrored in the diagnostic frameworks used by health professionals in that culture**

**Such a social construction of reality**, reinforced by health professionals, easily would be considered the **truth** by the majority of people in that culture. Even large proportions of gays, lesbians, and bisexuals citizens would adopt this belief.

This would create untold suffering and lead to wasted human potentials for individuals and society.

This scenario is in fact played out in many cultures in countless ways.

This same process could be visualized in the impact of social constructs in the discrimination of racial or ethnic groups, women, older people, the “mentally ill” etc.

**What is desirable  
changes from culture  
to culture and also  
from time to time**











example: **women suffrage:**

**1915** Denmark

**1920** United Staes

**1928** United Kingdom

**1930** South Africa **only granted to white women**

**1945** France, Italy, Jugoslavia, Japan

**1971** Switzerland

# WOMAN SUFFRAGE HEADQUARTERS. MEN OF OHIO!

GIVE THE WOMEN A SQUARE DEAL  
Vote For Amendment No. 23 On September 3-1912.

COME IN AND LEARN  
WHY WOMEN  
OUGHT to Vote.



- You can go back and come up with a lot of vivid examples from your own personal life

- In my own life I remember why I started very young to smoke cigarettes even if I disliked tobacco very much:

- I wanted to look like a man to the girls I liked.

Soul food is another thing: my mother used to cook me fried meat balls and French fries.....even today that I know is not a healthy food that is for me a magic food, even more it is love, is comfort and security!

- Don't you dare to take away my fried meatballs!!!!!!

Many factors are present and interacting at the same time.

Many factors are influencing us at the same time and their interactions are very complex.

Here some examples....

## **example:** Factors Which Determine Health

- **Biological factors**
  - including genetic predispositions, age-related processes
- **Psychological factors**
  - including coping abilities, self-efficacy, hardiness, self-esteem, communication skills, problem-solving skills
- **Lifestyle Factors**
  - including nutrition, smoking, alcohol consumption, substance abuse, exercise patterns, sexual practices, stress, sleep habits, leisure activities, and marital status
- **Family Factors:**
  - Including strength of family structure, amount of emotional support
- **Socio-Economic Factors:**
  - Including socio-economic status, education, access to and adequacy of health care services, working conditions, leisure activities, adequacy of housing, nutrition, exercise, availability of jobs, quality of social relationships and social support
- **Cultural Factors:**
  - Including health beliefs, health practices, eating customs, social activities, sexual practices, gender and role expectations
- **Structure of Society:**
  - Including laws, regulations, taxation, public health structure, school systems, industrial production, rule of government (whether democracy or not), availability of jobs, social equality, access to information
- **Consumer Practices:**
  - Including advertising, pricing, availability of goods and services
- **Environmental Factors:**
  - Including atmospheric pollutants, noise pollution, quality of water, chemical and nuclear waste, deforestation, industrial procedures



- Our reality is largely determined by the roles played by the people who interact with us
- by the roles that they give us and from the ways in which we relate with ourselves, others and society at large.
- by the formal and informal education we receive
- the social environment influences individual behavior through the imposition or communication of societal norms
- by the narratives carried out in kids fables, movies, TV, social media, popular heroes.
- By the social relationships with significant others and all that we introjected and becomes part of our personality.

We need to be aware on how we construe our experiences of what we call reality: the relationship with ourselves, the others, the world.





We need **more** people that relate to themselves, to others and to the planet with **more**

**Respect**

**Empathy**

**Authenticity/congruence (deep contact)**



How can we  
protect and promote human  
capital, individuality, resilience  
and  
Fully Functioning Persons?

By fostering the conditions that protect and promote individuality in all the processes of the construction of reality, identity, social roles and behaviors.

By relating to others in respectful, emphatic, genuine and congruent ways and applying them as the relational foundations in:

- ***Parenting***
- ***Schooling***
- ***Workplaces***
- ***Community***
- ***Society***
- ***Culture***

*Each of us is part of the daily  
social construction of reality.*

***Are we part of the solution***

*or*

***are we part of the problem?***

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