

Could reconstructive post-colonial criticism and critical epistemology contribute to forming a more critical doctor in Latin America?

¿Pueden la crítica poscolonial reconstructiva y la epistemología crítica contribuir a la formación de un médico más crítico en Latinoamérica?

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We live in a hyperfragmentation state, deinstitutionalization, and coexistence of multiple minorities that they do not coincide in several of their social aspirations. An emerging reconstructive post-colonial critique, as a critique of power relations, and not just a deconstructive post-colonial criticism, could recover the experiences of places, peripheral for the generation of knowledge¹.

On the other hand, critical epistemology is a proposal that supposes the construction of knowledge through the recovery of historical perspectives from multiple subaltern subjects in response to the neoliberal paradigms imposed by the West². It make possible for multiple narratives to coexist and feed off each other.

The construction of one's thought from a more holistic epistemic perspective that responds to sociocultural demands is one of the supreme assets of current Latin American critical epistemology attached the task of epistemic decolonization.

We could take elements of these theories to develop objectives such as interpreting the life stories of patients through the analysis of their disease constructs concerning culture, developing communication skills for interaction with community leaders and with people, and identifying and interpreting the use of indigenous knowledge of communities and traditional medicine in healing practices.

The development of skills and abilities with these objectives it is important in countries with unequal access to health resources, but with a rich accumulated experience in traditional and alternative medicine that has not been taken advantage of by doctors.

The use of educational activities based on critical epistemology and reconstructive post-colonial criticism could contribute to the formation of a more committed Latin American physician capable of interacting with the complex problems of medical practice in marginalized communities in the region and understanding with a more critical sense, the unstable geocultural realities of Latin America.

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