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From the Editor: Context creates meaning for evidence

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This journal explores how clinician scientists practice medicine. The practice of medicine occurs in a socio-cultural context. In fact, the sociocultural context shapes the both the creation and dissemination of evidence throughout the medical profession and the public domain. This context of care shapes the behavior of both doctors and patients. As the medical profession begins to engage in a discussion of the social determinants of health, it is imperative to avoid the fallacy that those determinants exist “out there” by underestimating the sociocultural context in which we practice. By definition, we are unaware of our own culture: it is our assumed normal.¹ Yet, culture affects behaviors—clinical behaviors.

Social sciences create evidence that I consider an important part of clinical research. This type of evidence informs us about the context for clinical practice. In this issue, the editorial focus expands to include the importance of context in care. We will continue to emphasize the skills necessary to read clinical research, but also look to the social sciences to help us understand the context of the doctor-patient relationship. That relationship is the context in which evidence is used.

One of the unique features of *Clinical Research in Practice, The Journal of Team Hippocrates* is the combination of an actual patient with abstract evidence. We aim to emphasize the bio-psychosocial world of the patient in those representations with a new feature called Informed Consent manuscripts, which summarize a body of clinical research and explain it in language a patient can understand. We also explore behaviors related to the use of clinical research and understand clinical relationships by enhancing sociocultural context in our Critical Appraisals.

References

1. Peacock J. *The anthropological lens: Harsh light, soft focus*. 2nd ed. Cambridge, UK: Cambridge University Press; 2001. doi: [10.1017/cbo9781139164924](https://doi.org/10.1017/cbo9781139164924)

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