Clarifications on social theory in dental hygiene research

Dear editor,

I am looking forward to dental hygiene research employing social theory. A recent article by Amber Lee and Zul Kanji ("Queering the health care system: Experiences of the lesbian, gay, bisexual, transgender community," *Can J Dent Hyg* 2017;51(2):80–89) indicated that dental hygiene research is at a stage where it intends to employ critical theoretical frameworks, and in this case queer theory, in its research designs in order to adequately provide dental hygiene care to our diverse population. I found the brief description on queer theory in relation to critical theory very promising. I would love to add a few thoughts, as I am passionate about social theory.

The aim of using critical theory in research is social change, especially if it is used within modernism. With critical theory, in its modern sense, there is a dominant group that oppresses other groups. Since the *Canadian Journal of Dental Hygiene* mostly publishes research conducted within Canada, it is situated in western culture. Therefore, it is fair to claim the dominant group in western culture, even though colonialism extends beyond our western culture, consists of Caucasian, heterosexual, Christian males. Gramsci called this power dynamic between societal groups hegemony. Hegemonic power is exerted and maintained by the dominant group at the top of the social and economic hierarchy.

Critical feminist theory can be used to explain power structures within dental practices, which traditionally consist of a male dentist with various dental professionals operating under him. However, with critical feminist theory, there is also patriarchy added to the mix, which adds to its complexity. Lee and Kanji list other critical theoretical frameworks in their article, such as feminist theory, critical race theory, and disability theory. However, there are numerous feminist theoretical frameworks, and critical feminist theory is just one of them. In addition, queer theory is most often used as a postmodern framework, and is probably better suited for this context, because of its ability to speak to identity construction.

Queer theory that is not used within the modern context, but rather in the postmodern context, operates with different power dynamics than those in hegemony. This is an important distinction to make when using queer theory in dental hygiene research. If one is analyzing power dynamics within institutions, laws and policies, organizations, and practices, in terms of a dominant group oppressing other groups, critical theory is then being used in a modern context.

Sincerely, Corinne Story, BDSc, MA Edmonton, Alberta, Canada

The authors respond

Dear Ms Story,

We thank you for your interest in our article and for your insightful comments. Within the context of our paper, the goal was simply to introduce the readership to the foundations of critical theory and general tenets of queer theory. Exploring critical theory in great detail was beyond the scope of our article so your expanded description is certainly valuable. As dental hygienists engage with marginalized communities in diverse practice settings, a heightened appreciation of historical and current privilege

and oppression is needed. Approaching care using critical theory will hopefully enable health care providers to practise through a more trauma-informed and culturally sensitive lens.

Sincerely, Zul Kanji, EdD, RDH, and Amber Lee, BDSc(DH), RDH Vancouver, British Columbia, Canada