

Theorising Behavioural Risk Factor surveillance

Drawing on post structural thought as a framework for this paper, the purpose is to theorise how it is possible to talk about Behavioural Risk Factor surveillance and to elaborate implications that emerge for practice. To obtain information about behaviours that lead to the development of chronic diseases requires of individuals a capacity to be self-analytical and to be so in a way that makes monitoring and measuring the health status and health-related quality of life (HRQOL) of the population meaningful. Like biomedicine, individuals need to objectify their body and behaviours to enable a measurement like that of 'healthy days'. A general principle of post structural thinking is to question how measurements of, for instance, healthy days have come to be considered as appropriate and possible. The focus of the paper will be on implications that emerge where a self-report of healthy days (via HRQOL surveillance measures) is assumed to reflect the views or experiences of 'the author' – that is, the person who gives the self-report. The practice of seeking self-reports of healthy days assumes what the person says (or writes) reflects a reality of healthy days for that person, and that another person is able to interpret this reality from the self-report of healthy days. In bringing forward this discussion is not to discount the possibility of Behavioural Risk Factor surveillance. Rather, the purpose is to ensure the best possible Behavioural Risk Factor surveillance is implemented.

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