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Health is democracy: diversity, equity, and social justice

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“To generate active trust expert knowledge must be democratically validated. Indeed, scientific statements are now treated by the public as contestable propositional truths and this is why expert systems need to become dialogical. (...) What is at stake is the creation of active trust generating social solidarity among individuals and groups” (Chantal Mouffe ¹, p. 43).

From November 21th to 24th, 2022, the 13th Brazilian Congress of Public Health (“Abrascão”) occurred in Salvador, Bahia. The theme of the Congress was *Health Is Democracy: Diversity, Equity, and Social Justice*. Our choice of the phrase *Health Is democracy* was an intentional reference to Professor Sergio Arouca’s speech at the opening of the 8th National Health Conference and Health Reform movement ². At times, turning to the past is essential to illuminate the future. Democracy is a very relevant subject to the Brazilian society and it properly fits the current moment, a time when the country’s democratic forces have come together and elected a new government that will certainly resume the democracy, interrupted since the 2016 coup. The democratic backsliding was coupled with the COVID-19 pandemic, hardly striking the Brazilian society, largely because of the most absolute failure of the Executive branch. In this dramatic context, the reflections and debates initiated at the 8th Conference needed to be updated in last year’s Abrascão.

The inspiration sought at that remarkable moment in our country’s healthcare history served to recall relevant issues for Public Health, among which the following stand out: the social determination of the health-disease process; the need to create and consolidate a health system that allows us to fulfill the idea that health is a right of all citizens to be guaranteed by the State; and the caveat that among the main problems to be faced are inequalities and inequities in exposure to disease risks and access to health services. All this emphasizes the urgency of ensuring respect for diversity and the ongoing struggle for social justice and equity.

Horried – and somewhat perplexed – we can see the timely glaring of the issues proposed in the historic conference. Since 2018, Brazil has experienced a far-right government, which purposely attacked democracy, promoted chaos, deteriorated resources, and denied and distorted science and persecuted its agents in many ways, aggravating these issues. The degree of attacks on rights, science, and life itself led different authors to call this government’s actions as necropolitical, due to its ultra-neoliberal, antifeminist, racist,

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and genocidal character³. Thus, the words diversity, equity, and social justice were added to the theme. By convoking once again its members to its largest congress, Brazilian Public Health wanted to contribute as a scientific, ethical, and political field to the solutions that Brazil will need to rise up and restore democratic order.

The novelty of the moment also made us analyze the need for innovation in the field of Public Health, stressing new emerging and relevant issues and, at the same time, reaffirming our identity as a diversified, heterogeneous, integrated, and multidisciplinary field. To be inclusive is to be available to the new, to the unusual, to transformation. Therefore, we did not seek to reproduce the important and broad specialization of our field in the assembly of our Congress. At the time, we considered that this perspective of Public Health was already fully represented in the congresses of large areas. We sought to reinvent, to recreate, and to multiply ourselves as a fertile field, creator of new questions and proposer of solutions and alternatives.

Coping with social inequalities, poverty, and human rights violations led us to rethink the foundations of public policies and their role in transforming this situation of exclusion that marginalizes millions of individuals. Democratic and inclusive policies that consider the population's diversity and demands and promote the coexistence of their multiplicity of ethnicities, religions, traditions, inclinations, and sensitivities. May the agenda of priorities of the new democratic government include combating poverty and all forms of social and political discrimination.

Based on the idea of social rights and the construction of solid values of participatory citizenship, we sought to organize a great 13th Congress that would allow greater capacity for discernment, criticism, and formulation of propositions for social and human development in Brazil, at this new moment in its politics and reestablishment of democracy. However, we also sought to base this on the understanding of a Brazil connected with the world's major problems and with global and regional solutions.

The activities were organized into 13 thematic axes:

- Axis 1: Health, environment, and society relations;
- Axis 2: Challenges and paths to (re)build Brazil and the role of social policies;
- Axis 3: Brazilian Unified National Health System: persistent challenges and perspectives;
- Axis 4: Citizenship: weaknesses and strengths of social participation;
- Axis 5: The COVID-19 pandemic and its legacies;
- Axis 6: Public Health in a globalized world;
- Axis 7: Public Health and transformations in the working world;
- Axis 8: Public Health and epistemologies;
- Axis 9: Public Health and sovereignty;
- Axis 10: Public Health and the interaction between its three subareas;
- Axis 11: Education and training in Public Health;
- Axis 12: Public Health, information, and communication: dialogues on new scenarios and challenges;
- Axis 13: Intersectionalities, social struggles, and human rights in Public Health.

This way of organizing the activities, including the reception of the papers, initially caused strangeness, doubts, and uncertainties that were being crossed step by step. The research groups of each of these thematic axes were responsible for assembling the other activities such as conversation circles and round tables to diligently represent ethnicity, race/skin color, and gender. We also sought to bring the necessary generational renewal

to the central activities. Young researchers composed important moments of the program schedule. The series of “Intergenerational Breakfasts” was also a public success, in the first hour of the morning, in which senior researchers talked informally about their trajectories and the challenges of the area with new researchers.

Eventually, more than 7,000 papers were registered, and the Scientific Committee organized a total of 985 coordinated communications, 4,519 asynchronous communications, and more than 200 other activities among round tables and debate: the methodical, dedicated, and responsible work of the Scientific Committee was formidable. Over 6,000 congresswomen and congressmen visited the Convention Center. This was also the Abrascão with the highest number of exemptions, reaching almost 1,000 participants who benefited from discounts or exemption from the registration fee.

The participatory work conducted with social movements since early 2022 resulted in *Abrasco em Movimento* (Abrasco in Motion): a space where messages, conversation circles, and artistic expressions otherwise depleted the demands of social movements addressed to health workers. It reflected the need for teamwork among scientists and social movements, showing the relevance of the transversality of issues such as gender, race/skin color, ethnicity, among other more prominent issues. This congress was a plural space for discussing current problems and health priorities that can be included in the agenda of the new democratic and progressive government, beginning now.

Finally, the 13th Abrascão celebrated the democracy and the continuous struggle of Public Health for a more equal society and allowed for the formulation of ideas to be presented as contributions in this new democratic rebirth, which began on January 1st, when a perverse and anti-science period was ended, one of destruction of health and all pro-equity policies and environmental sustainability.

We are sure that the model followed in recent years can be reversed. It produced increased inequalities, social unprotection, and environmental degradation, claiming a supposed economic growth that did not happen. We need to build a model in its place that seeks the well-being of society, the protection of the environment, and that encourages public policies to seek their bases in the sciences, knowledge, and will of the majority of society. Foundation without which there will never be an inclusive and healthy society.

The appointment of Dr. Nisia Trindade, a respected researcher and public manager, to the Brazilian Ministry of Health, as well as the creation of many ministries (for Indigenous Peoples, for Racial Equality, for Women) dedicated to implementing pro-equity actions is a great beginning of the new government.

Cheers for Democracy!

Cheers for the struggles for equity and social justice, in all spheres of life!

Cheers for Public Health!

Cheers for Abrasco!

Cheers for Science and knowledge!

For a bright future for the health of the Brazilian people!

Contributors

R. T. Onocko-Campos contributed to the writing and review and approved the final version. I. C. M. Pinto contributed to the writing and review and approved the final version. M. L. Barreto contributed to the writing and review and approved the final version.

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