

Social Determinants of Health: perspective for understanding the relationship between processes of social exclusion and equity in health

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The effectiveness of equity in health as one of the principles advocated by health policy has been a hard challenge in the Brazilian daily. Why are diseases that since decades have been known about its prevention and treatment even kill or incapacitate thousands of people? Why the possibilities to have a specific treatment many times depend of the country region where people live? Why depending on age, income, gender or sexual orientation more or lesser availability of health care services for individual or social group can be expected?

These are some of the questions which the understanding and development of the concept of Social Determinants of Health (SDH) can provide support for the construction and analysis of responses and coping strategies really effective. The SDH has been understood by World Health Organization (WHO) as the conditions that people are born, grow, live, work and age, and inequalities that manifest in these conditions also create health's inequalities¹.

Among different conditions that may generate these inequalities, the understanding and addressing the social exclusion process that make difficult for specific social groups to participate completely in communitarian and social live, are characterized as one of the priority focus, according to the WHO, in the search for equity in health.

There are many theoretical and methodological perspectives when analyzing the social exclusion and its relationship to health. However, it is possible to identify a consensus in literature regarding to the social exclusion process as a multidimensional, dynamic and characterized by its relational character. The relational aspect of the exclusion processes is emphasized and characterized as an interaction of unequal power relations of different dimensions (economic, political, social and cultural) and in different levels that include individuals, families, social groups, communities and countries that may culminate in social stratification processes².

Thus, the impact of a particular disease, and even the vulnerability to this are related to biological determinants previously established (age, genre, genetic predispositions, etc) interacting to the consequences of the social stratification process based on criteria such as genre, ethnicity, economic stratification and age. These processes shape different possibilities of live and access to essential services for the protection and promotion of health, of exposure to circumstances that bring harm to health related problems (biological, social, psychological and economical) to confront these circumstances by individuals and collectivities.

In this sense, the perception of social exclusion as a "process" and not as a "state" increases the possibilities of understanding by health professionals regarding the nature and cause of the hardships and inequities, contributing to the development of more appropriate and effective approach to these issues. From this conception it is understood that the equity promotion in health crosses by actions about the SHD and requires a political process of power redistribution for empowerment promotion to individuals and groups in social disadvantage. In addition to this political process, highly integrated, it is fundamental transformations in the health professional education and work, because, as recommended by the National Health Promotion Policy, it has to extend its services and actions to beyond the institutional walls reaching people and the community in their real-life contexts.

These changes require, among others, to overcome reductionist paradigms historically constituted, the development of actions that truly reflect the theoretical principles adopted and the dialogue between different fields of knowledge and different ways to build these knowledge. Thus health professionals will be able to a better understanding about the complexity of human existence, and health disease process outlining interdisciplinary actions that highlight the expression of diversity at the expense of inequality and in support for strengthening social justice development.

REFERENCES

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