EDITORIAL

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I had the privilege to attend the recent WORLD CONFERENCE ON SOCIAL DETERMINANTS OF HEALTH, held in Rio de Janeiro, Brazil, October 19th to 21st, representing the International Association of Logopedics and Phoniatrics – IALP, as its past-president. The conference was the largest WHO meeting outside the organization's headquarters since the Alma-Ata Declaration, on primary health care, in 1978, at the former USRR, that reaffirmed health as a fundamental human right ant the most important world-wide social goal. An intense three-day programme, with representatives of 120 countries, offered a high level discussion and reflection on social determinants of health and how to address the challenges posed by inequities. Social determinants of health is a term used as a shorthand to encompass the social, economic, political, cultural and environmental determinants of health.

Government representatives from all over the world, politicians, WHO staff members, experts and NGO representatives gathered to understand the causes of health inequities and to take action to making policy coherent at national, sub-national and local levels. Experiences from several countries, such as Uruguay, New Zealand, Ghana, El Salvador, Norway and Peru served as inspiration. The main message was that "health inequities cause unnecessary suffering and result from adverse social conditions and failing public policies" (Marie-Paul Kiene, Assistant-Director General at WHO). Health inequities are, per definition, evitable and this World Conference represented an important opportunity to give visibility to this essential discussion. A discussion paper named CLOSING THE GAP: POLICY INTO PRACTICE ON SOCIAL DETERMINANTS OF HEALTH (OMS, 2011) was published at this occasion to inform proceedings at the conference. Structural determinants are seen as any condition that produces stratification within a society, such as distribution of income, discrimination (gender, class, ethnicity, disability, or sexual orientation) and political and governance structures that reinforce inequalities ion economic power.

The executive summary highlights that health inequities are found is all countries, even in developed and rich societies, and arise from the conditions in which people are born, grow, live, work and age. Five fundamental elements were chosen as themes for this world conference and are summarized at this important document: 1. Governance to tackle the root causes of health inequities: implementing action on social determinants of health; 2. Promoting participation: community leadership for action on social determinants; 3. The role of the health sector, including public health programmes, in reducing health inequities; 4. Global action on social determinants: aligning priorities and stakeholders; 5. Monitoring progress: measurement and analysis to inform policies and build accountability on social determinants. The document states clearly that the general principles must be adapted to the country needs and context. Moreover, it reinforces that a social determinants approach cannot be a "programme" but requires a holist approach incorporating the five previously mentioned blocks applied across society. The Brazilian Minister of Health, Dr Alexandre Padilha registered that "There is enough evidence associating health indicators to social issues. We already know, for instance, that public policies are fundamental to address the social determinants of health. We have to admit there is also enough evidence to prove that it is possible to do things differently. Political will and cooperation between countries are fundamental".

It is widely accepted that acting on social determinants can build an inclusive society. It is also accepted that action is possible and that for every dollar invested in prevention, seven dollars in treatment and social rehabilitation are saved. The challenges are huge but the excitement to change the scenario is also great. Kathleen Sebelius, Secretary of Health and Human Services, from the USA, closed her speech indicating that we have to stop saying that we cannot afford it since the real fact is that we cannot afford not to do it.

The disciplines of Speech-language Pathology and the Audiology recognize the importance of communication as one essential component to the human health. Even if our researches in the prevention area are still too shy, there is an increase desire to face this challenge. The editors of the SBFa scientific periodicals have

been investing efforts in improving the quality of the manuscripts which can help the comprehension of the social determinants to human communication disorders. Well designed and precisely developed researches can contribute to the estimation of the real prevalence of human communicative disorders in our country. Moreover, with this clear basis, a good national plan can be draw to be compatible with the dimension of the problems our patients have to face.

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REFERENCE

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