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Challenges And Perspectives In Addressing Socially Determined Diseases In Brazil: A Multifaceted Analysis

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Abstract:

Socially determined diseases in Brazil reflect the profound social and economic disparities present in the country, exacerbated by extreme poverty and lack of access to basic health services. In addition to infectious and parasitic diseases prevalent in impoverished communities, non-communicable chronic diseases (NCDs) have been increasing in incidence, especially among the most vulnerable populations. Mental health is also affected by social factors such as poverty, discrimination, and lack of access to mental health services. Brazil launched the Healthy Brazil program in 2023 to address these challenges, promoting health equity and addressing the underlying social causes of diseases. The initiative represents a significant milestone in Brazilian public health, aligning with the UN Sustainable Development Goals (SDGs) and the PAHO initiative for disease elimination in the Americas. To achieve the goal of minimizing and even extinguishing socially determined diseases, comprehensive public policies are needed to address the social determinants of health, promote social inclusion, and strengthen health systems, ensuring universal access to quality services. The implementation of holistic and inclusive strategies is essential to create healthier and fairer societies, where everyone has equitable opportunities to achieve their maximum health and well-being potential.

Keyword: Socially Determined Diseases; Health Equity; Public Policies; Social Determinants of Health.

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I. Introduction

Socially determined diseases in Brazil are a reflection of the deep social and economic disparities permeating the country. Extreme poverty and lack of access to basic services such as clean water, adequate sanitation, and healthcare contribute to the prevalence of infectious and parasitic diseases in underserved communities. Malnutrition also persists in many areas, affecting primarily children and the elderly.

Furthermore, non-communicable chronic diseases (NCDs) are becoming increasingly common, especially among the most vulnerable and marginalized populations. Lack of health education, poor dietary habits, and limited access to preventive healthcare services contribute to the rise of conditions such as diabetes, hypertension, and cardiovascular diseases.

Socioeconomic inequalities also influence mental health, with higher rates of diseases such as depression and anxiety in impoverished urban areas and rural communities where access to mental healthcare services is scarce.

In other words, socially determined diseases in Brazil are a reflection of the social and economic injustices that persist in the country, requiring comprehensive approaches that not only treat symptoms but also address the underlying causes of health disparities.

On February 7, 2023, Brazil, through the work of its Ministry of Health (in partnership with 13 other ministries), became the first country to launch a specific program to eliminate and control socially determined diseases, the Healthy Brazil program. The program aims to address the social causes underlying diseases and

promote health equity. It encompasses a comprehensive approach that combines preventive measures, early diagnosis, appropriate treatment, and actions aimed at reducing social inequalities. This initiative represents a significant milestone in Brazilian public health, addressing issues related to the social determinants of health, thus improving access to healthcare for all citizens.

II. Method

In the context of an academic essay on socially determined diseases in Brazil, methodology plays a crucial role in the analysis and understanding of these health conditions. A robust methodological approach may involve the combination of quantitative and qualitative methods to examine the complex relationships between social determinants and health. This may include the analysis of demographic and epidemiological data to identify patterns of disease incidence and prevalence in different social groups, as well as qualitative studies that explore the experiences and perceptions of affected communities. Additionally, participatory and collaborative research with marginalized individuals and groups may be essential for understanding the social and cultural contexts that shape health disparities. By adopting a comprehensive and inclusive methodological approach, researchers can significantly contribute to the identification of effective policies and interventions that address the social roots of diseases and promote health equity in Brazil.

(As this is a free academic essay, the bibliographic references used for thematic elucidation are located at the end of the text, rather than inserted within the body of it).

III. Results And Discussion

Social determinants of health (SDH) are complex factors that exert significant influence on the health of populations in different social contexts. In a country like Brazil, marked by profound social, economic, and healthcare access inequalities, these determinants play an even more crucial role. Firstly, socioeconomic conditions have a direct impact on people's health. Income, for example, is closely linked to the ability to access nutritious food, adequate housing, and quality healthcare services. Individuals with low income often face difficulties in obtaining preventive medical care and proper treatment, which can result in higher incidence of preventable and chronic diseases.

Additionally, the physical environment significantly influences community health. In densely populated urban areas lacking basic infrastructure such as adequate sanitation and clean water, rates of infectious diseases tend to be higher. Air and water pollution can also contribute to the development of adverse health conditions, such as respiratory diseases and skin problems. These challenges are especially pronounced in regions where the populations live in conditions of social vulnerability, such as slums and remote rural areas.

The social support network is another essential determinant of health. Family, friends, and community support play a crucial role in people's emotional and mental well-being. In communities where the social fabric is strong, individuals are more likely to receive emotional and practical support during times of difficulty, which can help mitigate the negative impacts of stress and adversity on health.

Lifestyle and health behaviors are also important determinants of health. Habits such as balanced diet, regular physical activity, and abstention from smoking and excessive alcohol consumption are associated with better health outcomes. However, factors such as access to healthy foods, safety in public spaces for exercise, and advertising of harmful products can negatively influence people's health choices, especially those in situations of social vulnerability.

Therefore, the SDH in Brazil are multifaceted and interconnected. Addressing these determinants requires a holistic approach that goes beyond the traditional healthcare system and includes public policies that tackle socioeconomic inequalities, improve living conditions, and promote healthy environments and robust social support.

Within the program discussed, Brazil establishes an international milestone, aligned with the WHO, global goals established by the United Nations (UN) through the Sustainable Development Goals (SDGs) of the 2030 Agenda, and the initiative of the Pan American Health Organization (PAHO) for the elimination of diseases in the Americas.

The Sustainable Development Goals (SDGs) are a global agenda adopted by the United Nations in September 2015, consisting of 17 goals and 169 targets to promote sustainable development worldwide by the year 2030. These goals represent a comprehensive and integrated vision that recognizes the interconnection between the social, economic, and environmental challenges faced by humanity.

The SDGs cover a variety of thematic areas, including eradication of poverty, zero hunger, health and well-being, quality education, gender equality, clean water and sanitation, affordable and clean energy, decent work and economic growth, reduced inequalities, sustainable cities and communities, responsible consumption and production, climate action, life below water, life on land, peace, justice, and strong institutions, partnerships for the goals, among others.

Each goal is accompanied by specific targets, which serve as measurable indicators to monitor progress towards achieving the SDGs. United Nations member states have committed to implementing these goals at the national level, adapting them to their own realities and priorities.

The SDGs represent a significant milestone in promoting sustainable development, seeking to balance the economic, social, and environmental dimensions of human progress. They recognize the need to address urgent issues such as poverty, inequality, environmental degradation, and climate change in an integrated and collaborative manner.

In the context of Brazil, the SDGs offer a valuable roadmap to guide government policies and actions, as well as to mobilize civil society, the private sector, and other stakeholders in pursuit of a more just, prosperous, and sustainable future for all. Progress towards the SDGs requires ongoing commitment to the implementation of effective policies, strategic investments, and international cooperation.

Malnutrition and poverty-related diseases:

Malnutrition and poverty-related diseases represent a serious public health problem in many parts of the world, affecting mainly the most vulnerable and marginalized populations. Malnutrition can manifest in various forms, from undernutrition, characterized by inadequate intake of calories and essential nutrients, to deficiencies of micronutrients such as iron, vitamin A, and iodine. These conditions can lead to a range of health complications, including stunted growth and development in children, compromised immune system, and increased susceptibility to infectious diseases.

In areas of extreme poverty, where access to nutritious food is limited and living conditions are precarious, malnutrition is often exacerbated by a range of factors such as lack of basic infrastructure, low education levels, unemployment, and food insecurity. Additionally, lack of access to clean water and adequate sanitation increases the risk of waterborne diseases such as diarrhea and cholera, which can further worsen the malnutrition situation and further weaken the health of communities.

Childhood malnutrition, in particular, has long-term consequences for the physical and cognitive development of children, affecting their school performance, employment opportunities, and quality of life in adulthood.

To effectively address this problem, comprehensive approaches are needed that combine nutritional interventions, access to safe and nutritious foods, health education, and strengthening of healthcare systems in areas affected by poverty and inequality. Only through coordinated and collaborative efforts involving governments, non-governmental organizations, and the community at large can we work to overcome malnutrition and improve the health and well-being of the most vulnerable populations.

Socially determined diseases are those whose incidence and prevalence are influenced by social, economic, and environmental factors, in addition to individual biological factors. They can include a wide variety of health conditions that are more common in specific social groups due to their life circumstances, access to resources, and exposure to certain environments. Some examples of socially determined diseases include:

Infectious Diseases:

The incidence of infectious diseases such as Chagas disease, trachoma, filariasis, schistosomiasis, onchocerciasis, and geohelminthiases is often associated with unfavorable socioeconomic conditions. Lack of access to adequate healthcare in these communities can hinder early diagnosis and effective treatment of these diseases, leading to severe complications and even death. Additionally, overcrowding and lack of basic sanitation in urban and rural areas increase the risk of transmission of these diseases, creating a cycle of poverty and poor health.

The presence of diseases such as HIV/AIDS, tuberculosis, malaria, viral hepatitis, syphilis, and HTLV is also closely linked to socioeconomic and environmental conditions. Lack of access to preventive healthcare services and proper treatment in these communities can contribute to the spread of these diseases. Furthermore, factors such as migration, poverty, gender inequality, and lack of health education can increase the vulnerability of populations to these diseases, complicating control and prevention efforts.

For better understanding:

- 1. Chagas Disease: The transmission of Chagas disease is associated with poor housing conditions and lack of basic sanitation, common in rural and peri-urban areas. Public policies aim to improve housing, vector control, and promote access to treatment and diagnosis;
- 2. Trachoma: Trachoma is prevalent in communities with limited access to clean water and inadequate hygiene. Public policies to combat this disease include health education campaigns, antibiotic distribution, and improvements in water and sanitation infrastructure;

- 3. Filariasis: Transmitted by mosquitoes, filariasis is common in areas of low socioeconomic development. Public policies focus on drug distribution, vector control, and improvements in living conditions;
- 4. Schistosomiasis: Schistosomiasis is associated with lack of basic sanitation and clean water, commonly found in tropical and subtropical regions. Public policies include mass treatment, vector control, and improvements in sanitation infrastructure;
- 5. Onchocerciasis: Prevalent in poor rural areas, onchocerciasis is fought through drug distribution programs, vector control, and efforts to improve living conditions in affected communities;
- 6. Geohelminthiases: Closely linked to poverty and lack of sanitation, geohelminthiases are addressed by policies aiming at health education, drug distribution, and improvement of basic sanitation conditions;
- 7. HIV/AIDS: HIV transmission is influenced by social, economic, and behavioral factors. Public policies involve health education, access to condoms, antiretroviral treatment, and combating stigma and discrimination;
- 8. Tuberculosis: Tuberculosis is common in marginalized populations, affected by poverty, lack of access to healthcare services, and poor living conditions. Public policies include early diagnosis, proper treatment, and measures to reduce transmission;
- 9. Malaria: Prevalent in tropical and subtropical areas, malaria is influenced by poverty and lack of access to healthcare services. Public policies aim at vector control, distribution of insecticide-treated mosquito nets, and access to effective treatment;
- 10. Viral Hepatitis: Viral hepatitis is related to socioeconomic factors such as lack of sanitation and limited access to healthcare. Public policies include prevention, vaccination, testing, and treatment;
- 11. Syphilis: Syphilis is linked to socioeconomic and behavioral factors, requiring policies that promote sexual education, access to condoms, testing, and proper treatment;
- 12. HTLV: HTLV transmission is associated with risky behaviors such as unprotected sex and needle sharing. Public policies involve health education, access to condoms, testing, and treatment.

To effectively address these challenges, a comprehensive approach is needed that addresses not only the biological aspects of the diseases but also their socioeconomic and environmental roots. This includes investments in healthcare infrastructure, basic sanitation, health education, promotion of gender equity, and poverty reduction. Additionally, the creation of public policies aimed at improving living conditions and universal access to healthcare is crucial to reducing the incidence of these diseases and promoting the well-being of affected communities. Only through coordinated and collaborative efforts involving governments, non-governmental organizations, and civil society can we work to eliminate these diseases and build a healthier and more equitable future for all.

Non-communicable Chronic Diseases (NCDs):

Non-communicable chronic diseases (NCDs) are long-term conditions that generally progress slowly and can be managed but not cured. They represent a diverse group of illnesses including diabetes, cardiovascular diseases, hypertension, obesity, cancer, chronic respiratory diseases, among others. These diseases usually result from factors such as lifestyle, genetics, environment, and age, and are associated with a range of long-term health complications.

NCDs constitute a significant public health challenge in Brazil, affecting millions of people across the country. According to data from the Ministry of Health, approximately 9.1% of the Brazilian population has diabetes, 25.4% are hypertensive, 20.4% are obese, and 30% suffer from some chronic disease. Additionally, cardiovascular diseases and cancer account for about 60% of all deaths in Brazil. These statistics highlight the magnitude of the NCDs problem and the urgent need for effective approaches to prevention, treatment, and control of these conditions.

Access to healthcare for NCD patients is often hindered by a range of factors including financial, geographical, and social barriers. Many patients face challenges in obtaining early diagnosis, proper treatment, and continuous monitoring due to lack of financial resources, long waiting queues in healthcare services, and inadequate healthcare infrastructure. Moreover, disparities in healthcare access are exacerbated by issues such as low educational attainment, unemployment, and lack of information about healthy habits, which can hinder treatment adherence and increase the risk of NCD complications.

Social inequalities play a significant role in determining the health profile of populations and the distribution of NCDs. Socioeconomically disadvantaged groups are more likely to be affected by these diseases due to poor living conditions, limited access to healthy foods, polluted environments, and lack of access to quality healthcare services. Additionally, factors such as race, gender, and geographical location can influence the risk of developing NCDs and access to proper treatment, contributing to widening social disparities in health.

To address the challenge of NCDs and reduce social inequalities in health, comprehensive and integrated public policies addressing the social determinants of health are needed. This includes initiatives to promote healthy habits such as awareness campaigns about balanced nutrition and physical activity, implementation of

policies for smoking and excessive alcohol consumption prevention, expansion of access to preventive healthcare services and quality treatment, and implementation of monitoring and evaluation strategies to ensure the effectiveness of interventions. Additionally, it is crucial to invest in education, employment, and economic development to reduce social disparities that contribute to the emergence and worsening of NCDs.

Mental Health:

Mental health is a fundamental aspect of human well-being, encompassing not only the absence of mental disorders but also the emotional, psychological, and social balance of an individual. Mental disorders, such as depression, anxiety, and stress, are complex conditions that can be influenced by a variety of social, economic, and environmental factors.

Poverty, for example, is closely associated with increased risk of developing mental disorders, due to financial stress, housing insecurity, and lack of access to basic resources. Racial, gender, sexual orientation, or disability discrimination can also have a significant impact on mental health, resulting in marginalization, social exclusion, and psychological trauma. Additionally, exposure to violence, physical or emotional abuse, and interpersonal conflicts can trigger or exacerbate mental health problems, perpetuating a cycle of psychological suffering and emotional imbalance.

Social isolation and lack of support networks are other social factors that can contribute to the deterioration of mental health, increasing feelings of loneliness, helplessness, and hopelessness. Furthermore, the scarcity of accessible and quality mental healthcare services is a significant barrier to the treatment and recovery of mental disorders, leaving many individuals without the necessary support to cope with their conditions.

Therefore, addressing the social determinants of mental health is essential to promote the psychological and emotional well-being of communities, requiring interventions that address not only individual symptoms but also the social conditions that contribute to their origin and persistence. This includes public policies aimed at reducing social inequality, promoting inclusion and diversity, providing universal access to quality mental healthcare services, and strengthening community support networks.

Additionally, it is crucial to invest in mental health education programs, combat stigma and discrimination associated with mental disorders, and promote self-care and emotional resilience strategies throughout society. By recognizing and addressing the social factors that influence mental health, efforts can be made to create healthier and more supportive environments where everyone has the opportunity to thrive and achieve their full emotional and psychological potential.

IV. Conclusion

These are some socially determined diseases and conditions, but the list may vary (including being larger) depending on geographic, institutional, organizational, and other contexts related to SDH.

Recognizing SDH is crucial for informing effective and efficient public policies that address health inequalities and promote the well-being of all populations. To minimize and even eradicate socially determined diseases, a continuous commitment to implementing comprehensive and integrated strategies is necessary. This includes investments in education, employment, and affordable housing to reduce poverty and socioeconomic disparities that fuel the occurrence of these diseases.

Furthermore, it is essential to strengthen healthcare systems, ensuring universal access to quality preventive and healthcare services, especially for marginalized and vulnerable groups. Promoting health equity also requires policies that address structural issues such as racism, gender discrimination, and inequalities in access to resources, as well as measures to strengthen community support and social participation in the formulation and implementation of health policies.

By adopting a holistic and inclusive approach, we can create healthier and more just societies where everyone has the opportunity to achieve their maximum potential for health and well-being.

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