

Special editorial

Saúde e Sociedade: an open space to reflection and expression of critical perspectives in the dialogue between the social sciences and humanities and the public/collective health

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This special editorial highlights two facts that contributed to the consolidation and recognition of *Saúde e Sociedade* as a journal that has enabled the dialogue between the social sciences and humanities and public/collective health: 25 years contributing to the disclosure of the knowledge produced in this dialogue and the affirmation of its editorial line.

Today *Saúde e Sociedade* occupies the fourth place among the publications in Portuguese language in the field of Collective Health and the ninth place among the most cited, according to the ranking of Google Scholar 2016. The prominent place taken by the journal in the field of public/collective health in these 25 years indicates some hits and points to future prospects regarding the achievements so far accomplished. In this sense, despite the major challenges of the scientific editorship of the journal and the issues to consolidate its editorial line, we highlight the “expansion of its power in the production of reflective and critical scientific knowledge on various themes and objects of the public and collective health field, under the perspectives of the social sciences and humanities” (Ianni; Nakamura, 2015, p. 7).

Saúde e Sociedade sought to maintain the disclosure of a reflective and critical production in line with the historical, sociocultural and political changes, not only in the health area, but also in other related areas. Since its origin, the journal has been following and updating the reflective and critical thinking produced both by professionals

from universities and by managers and workers from the health area and other sectors relates to public policies. Particularly in the health area, the articles published after the implementation of the Brazilian Unified Health System (SUS) express the production course of knowledge according to the right and wrong ways of the practice, supporting nowadays issues concerning the affirmation of the universal right to health and to the recognition of the right to diversity.

In articles published more recently, the resumption of “traditional” themes stands out in the public/collective health field, simultaneously to the need to understand topics related to sociocultural and political changes, observed in contemporary societies. In the interweaving of challenges and opportunities for critical reflection of old and new themes, we highlight articles that have addressed broader issues about the role of the State, financing, politics, management and social participation, care and access to health services, alongside to specific themes regarding mental health policies, environmental health, occupational health, oral health, violence, traversed by issues relating to social and cultural experiences of class, gender and sexuality, generation, race/ethnicity, among other social markers. These approaches show the challenges of reflection on public/collective health, thereby reinforcing the importance of the dialogue and the approach with theoretical-conceptual and methodological references of the social sciences and humanities.

These themes, recurrent in the recent years, seem to express some concerns over the academic and political debate in the public/collective health field. The first one seems to be related to the fragility of consolidating the principles of universality and equal rights in the context of inequality and diversity. The second refers to the complexity of consolidating the right to diversity in these contexts, especially when considering the intersectionality of different social markers. Finally, a third concern, in this debate, emerges most strongly in the current political moment of threats and uncertainties regarding social rights, putting in question the State-Society relationship, more specifically the role of the State in public policies, in particular the right to health.

From the dialogue with the social sciences and humanities, new perspectives of understanding the first two concerns aforementioned seem to open up, as it becomes possible to reflect on the dilemmas of social and cultural (in)justice - especially in the period that some authors call as “post-socialist” - from concepts such as “recognition” (cultural differences) and “redistribution” (on socioeconomic inequalities) (Fraser, 2006), considering the dialectical perspective among these concepts. It is not about contrasting possibilities of universal or individuals rights, but to deem them in their complexity, unveiling “the structural and dynamic consequences of the interaction between two or more axes of subordination,” as proposed in the concept of intersectionality (Crenshaw, 2002, p. 177). Accordingly, regarding the universal right to health, people should also reflect on the cultural and socioeconomic rights (or lack of rights) when considering men/women, black men/black women, young/older people, and the poor. To discuss the recognition of the rights of these groups regarding health issues is the way to affirm the possible universality of the right to health, while approaching the critical reflections of both the public/collective health and the social sciences and humanities, expressing our common concerns.

Based on these concerns, the proximity and the dialogue between these areas of knowledge assume greater relevance, mainly regarding the third concern, on the role of the State. This is not just about the possible contribution of theoretical-conceptual and methodological references of the social sciences and humanities to understand the current moment of uncertainty regarding the direction of social rights - in particular, the threats to SUS and the right to health. On the contrary, the dialogue is established by the indignation expressed in speeches

of different political entities - from health, social sciences and humanities -, whose amplified publicity perhaps may help to avoid what Amélia Cohn referred to as “the dismantling of SUS’ essence, of what moved and keeps on moving it: the ideals of social justice, the right to health, equity, and its civilizatory aspect” (Cohn, 2016).

It is expected, therefore, that such concerns, far from restraining reflective and critical thinking, inspire the movement in search for answers, new explanatory and possibilities and political participation, pointing out some “directions to follow” (Ianni; Nakamura, 2016, p. 8). In this sense, *Saúde e Sociedade* aims to contribute to the affirm and encourage this dialogue.

References

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