INTERNATIONAL OBSERVATORY
OF HUMAN CAPABILITIES,
DEVELOPMENT AND PUBLIC POLICY

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International Observatory of Human Capabilities, Development and Public Policy – linked to the Center for Public Health Studies, Multidisciplinary Center for Advanced Studies, University of Brasilia, and to the Center for Bioethics and Diplomacy Studies in Health, Oswaldo Cruz Foundation

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This collection can also be accessed on the website http://www.capacidadeshumanas.org, in Portuguese, Spanish and English.

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260 p.; 21 cm. – (Série Estudos e Análises; 2)

Several authors.
Trilingual edition: Portuguese/Spanish/English


CDU 614

Pan American Health Organization
Brasilia, DF, Brazil, 2015
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Brasilia, DF, Brazil
2015
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PRESENTATION

This publication is the result of a cooperative effort between the Observatory of Human Resources in Health of the University of Brasilia and the Center for Bioethics and Diplomacy Studies in Health of Fiocruz, which aims to promote a critical approach to relevant issues that usually relate to human resources, health, development and inequalities. This purpose was possible with the collaborative project of the International Observatory of Human Capabilities, Development and Public Policy, implemented in 2012, with the support of the Pan American Health Organization, through the cooperation agreement between the agency, Fiocruz and the Ministry of Health.

The approach to this thematic universe is based in the meaning of Amartya Sen on the human dimension of development, which recognizes health, education and social security as essential conditions to ensure the freedom of people to choose what they want to be and do; i.e., a vision of development, which aims to prevent serious personal privations and promote social justice, distanced from other interpretations, in which health and education are mere instruments of survival and maintenance of healthy and well-skilled workers.

The first edition of the series of studies and analysis of the International Observatory of Human Capabilities, Development and Public Policy addressed trends in health, education, labor, social security and the environment in selected countries. The intention was to stimulate controversy to the fact that economic and social development would be taking place towards the creation of a plurality of lifestyles freely chosen by people.

This collection of texts aims to strengthen this debate, focusing again on two issues raised in the presentation of the previous issue: the...
vocation of capitalist development, as occurs in Latin America and other continents to inevitably impose certain standardized and controlled styles to live in society, were there is not the unveiling of the horizon of freedom promised by Sen’s theory; and the impression that often this horizon of freedom is definitely made not viable by the type of development imposed unilaterally by the State, a phenomenon that can occur in both contexts of authoritarian as democratic regimes.

The editorial orientation of the first report was maintained in the current issue, without previously defining for the analysis the theme proposed to guest authors, so that they could presented contributions from their own point of view. However, the new cast of subjects sets an axis of approach that refers to a discussion of specific health and environment problems, whose confrontation is in the core of the discussion on development and public policies: Environment and Bioethics; Health and Agrochemicals; Medicalization; Smoking; Alcoholism; Industrial Food; Risk Factors Regulation; Health and Freedom; Health Promotion; People with Disabilities; and Drug Policy. The sequence of these contributions begins with an appreciation of the development process that portends for Brazil in the post-2010 international scene.

The intention of the coordinators of the editorial project is to explore new perspectives on the discussions that followed the inaugural publication of these studies and analyzes. The organization and the release of this publication in a seminar that brings together the authors for the presentation and discussion of their work with special guests confirm the willingness of the Center for Bioethics and Diplomacy Studies in Health of Fiocruz and the Observatory of Human Resources of UnB to proceed in the consolidation of the International Observatory of Human Capabilities, Development and Public Policy.

The expectation is that the broad dissemination of texts and discussions via internet will contribute to the critical renewal of approaches regarding the discussions about development, health and inequalities, defending long-term commitments on the social purpose of development,

fight against inequalities and the tenacious vigilance against the perpetuation or revival of these inequalities in renovated formats in the health field.

This agenda interests the international community as a whole, but has a special meaning for countries like Brazil, which aspire to a more just insertion than the current one in the global economic system, in which occupy positions marked by the subordinate and vulnerable character as mere sources of commodities. The optimistic outlook of an integrated, economic and social development, which emanated from the reports of the first publication of the Observatory, is gone, confirming the cautious conclusion expressed at the time that the favorable conditions of the first decade of the new millennium would not last without a solution to the impasse of world capitalism.

This cautious evaluation is in the article of Guilherme Costa Delgado, which presents an interpretive framework for Brazil in the macroeconomic and social context of international relations in the post-2010. The author highlights the reversal of favorable external relations to the “axis of commodities” and the specialization of this external trade component with China, linking this reversal to the financial crisis, whose epicenter was located in the US economy in 2008. Its prospective evaluation considering the current crisis of the Brazilian economic and social development would be optimistic if the country decided to opt for solutions such as green economy and low-entropy energy production, but the author warns that this is still a marginal option in the official agenda of the Brazilian State.

The other contributions to this publication contribute to the health agenda of international politics in the post-2015 context, focusing on health conditions, and not on the analysis of systems and services. Another bias purposely assumed corresponds to a particular emphasis on chronic diseases, which is not a preferred option compared to the institutional organizational perspective in the health field, somehow treated in the first publication of the series of studies and analysis of the Observatory of Human Capabilities, or the issue of infectious or acute diseases that affect mankind, which may be adopted as a scope for future editions.

Despite the focus on chronic conditions, the introductory appreciation of this publication is not intended to explore complementary or opposing aspects between the various copyright contributions, given the
diversity of themes and approaches caused by the editorial orientation previously referred. The summary of the chapters presented next seeks only to encourage the reader to weave, on its own, the connecting wires between the issues debated.

José Roque Junges reinterprets the classic vision that puts health in opposition to illness, in a way that diseases would be considered adversities underlying health itself, advocating the importance of environmental and socio-cultural factors, particularly in the case of chronic diseases. It deplores the precedence of emergency situations in relation to chronic health problems, because their monitoring “responds to the true meaning of a complex biological reality that is defined in its complexity by its interactions with the environment that make it reorganize itself continuously due to their answers regarding changes in their environmental conditions”.

In the essay on pesticides and health, Raquel Maria Rigotto and Ada Cristina Pontes Aguiar emphasize that the toxicity of numerous ingredients used extensively in modern agriculture is well established in the scientific literature. However, “social invisibility” of the impact of these disease processes on the profiles of illnesses and deaths is a barrier difficult to overcome, a serious problem that needs to be urgently addressed worldwide, especially in the case of Brazil, which is becoming one of the largest producers of food and leader in the intensive use of pesticides. The message of the authors is that the mantra that propagates the virtues of development based on the modernization of agriculture fueled by toxic pesticides must be unmasked, leading the government to adopt protective measures of the environmental ecosystem, of workers and the general population.

José Ruben de Alcântara Bonfim discusses different alternatives in the understanding of chronic disease, medicalization and iatrogenesis in order to draw attention to excesses and mistakes in addressing these issues, and worse, the care of affected people. About this, the author offers impressive information: only one in ten people with chronic diseases is treated successfully. The term medicalization is still controversial, coexisting interpretations from sociological, biological or biopsychosocial approaches in specialized literature. The author indicates his preference for the
meaning that says it is the conversion into disease processes of situations consensually seen as normal or part of life, which become objects of medicine, in an era in which biology and genetics are seen as the main forces that affect human life, with social factors playing a minor role. He continues characterizing the iatrogenesis as any disease or morbid state, in the physical or psychic sphere, due to medical intervention, correct or not, justified or not, that results in harmful consequences for human health, including diseases diagnostics that never cause symptoms or deaths.

As to smoking, José Agenor Alvares da Silva recalls that the use of this drug was something that referred to an imaginary of a good life, adventure and charm, an illusion unmasked after the evidence of the catastrophic effects of smoking, which exceed the rates of death from traffic accidents, alcoholism and suicide combined. It is an addiction characterized by physical and psychological dependence on nicotine consumption, included in the group of mental and behavioral disorders resulting from the psychoactive substance use, according to the Tenth Revision of the International Classification of Diseases (ICD-10). The author admits a relatively optimistic expectation, since research has pointed to a decrease in the prevalence of smoking in Brazil and other parts of the world. However, it recognizes that there is still a long way to go in this direction.

Consuming excessive amounts of alcohol in a short time is a practice associated with physical, social and mental problems, constituting a relevant public health problem. Deborah Carvalho Malta has extensive argument about it, as a result of important advances in the monitoring of these issues, whose basic evidence is scandalous: about 2.5 million annual deaths worldwide are associated with the use of alcohol. Accidents involving motor vehicles are at the top of the long list of these malefaction, including violence and accidents in general, alcohol intoxication, unsafe sex, unplanned pregnancies, sexually transmitted diseases, HIV, diseases that affect predominantly young populations. Furthermore, the use of alcohol is a risk factor for the use of other drugs, such as tobacco and illegal drugs. The author emphasizes the importance of the debate involving the different segments of government, health and education professionals, social groups, families and young people for the advancement of public policy and regulatory framework for alcoholic beverages.
Carlos Augusto Monteiro and Maria Laura da Costa Louzada address the implications for public policy regarding the association between ultra-processed food and chronic diseases. The focus of the debate is the new eating pattern, driven, among other factors, by dramatic changes in production, distribution and consumption systems of food around the world and by increased morbimortality from such diseases on a global scale, with special intensity in low- and middle-income countries. The authors argue that a possible reversal of these trends, in the current national and international scene, could be achieved by concatenated public policies regarding measures such as adopting dietary guidelines; promotion, protection and support actions for breastfeeding; promoting healthy eating at school; ultra-processed food advertising regulations for children; and fiscal policies.

Lynn Silver writes about the discussion on the regulation of risk factors for chronic diseases. She points risk factors related to social inequality, to food, tobacco and physical inactivity, indicating some recommendations on the challenges ahead, based on the North-American experience. Her initial argument is that the current situation in heart and lung diseases, diabetes and cancer is a result of pyramids of social inequality, social and technological change and deep economic interests and that, despite the huge medical and technological progress achieved, the obstacles to change this situation require more than new miracle drugs, which often make people dependent on invasive medical treatments or expensive drugs. That is, it is necessary to examine more closely the constitutive elements of chronic diseases and rebuild the understanding about this field. The author draws attention to the four main risk factors: unhealthy diet, smoking, physical inactivity and harmful use of alcohol. She highlights the great efforts of the public health community over the last decade in the United States to overcome approaches of limited effectiveness focused on educational proposals to modify individual behavior, giving greater emphasis on environmental risk determinants of chronic disease. However, she recognizes that this change occurs unevenly and with limited scope, since it requires building a broader social consensus capable of generating the desired changes, and outlines three key barriers of this process: financing, which, although very significant in that country,
does not include activities of prevention of chronic diseases as a priority; the training of human resources in the public health system and partner agencies, mainly the regulatory capacity in this area; and finally the political will to tackle economic interests that benefit from the status quo around the issues of production and consumption of food, tobacco and alcoholic beverages and habits related to physical activity.

The text by Roberto Passos Nogueira remits to a meditation on the thesis of Amartya Sen, according to which health is related to the range of effective choice opportunities to achieve the objectives that people wish to enjoy, i.e., the notion of health closely linked to freedom. Nogueira proposes to polemicize this referential referring to authors such as Kierkegaard, Tillich and Heidegger, who consider freedom an ontological property that characterizes the finitude and imperfection of the human being, closely linked to chronic diseases; and that perfect health cannot be prescribed nor imposed, requiring deeper analysis of the human being as a whole and in relation to the environment in which he lives. To place this essay at the center of the chapter list evokes Carlos Drummond de Andrade’s warning of that in the middle of the road was a stone, and at the same time, it is a provocation to the debate, proposing to explore a way in the middle of the stone.

Luis David Castiel proposes an uncomfortable reflection on health promotion based on improvement technologies for the pursuit of a perennial vitality. The discomfort is triggered with the doubt on the notion that we are autonomous individuals, able to establish cost/benefit relationships in exchanges in the world in which we live. It gets worse as it faces the author’s speculations about the unawareness of a “futurized” present promised by such technologies, disseminated as consumption products in the logic of capitalist development, and the inequality engendered in this process, whose indicator is based on the notion of preemption, as a possible precedence of some in accessing these technologies over others, or many others, or ultimately, considering the negative side of precarization and human suffering of huge contingents of excluded. Finally, Castiel stresses the reader when he states that concerns about longevity and immortality are symptoms of primal fear of death turned into demonstrations that serve the commodification of that fear.
The approach of Wederson Santos on the challenges of social policies for disability in Brazil is based on the premise that this term does not refer to a nature construct that demarcates a personal identity, but rather expresses a social, historic and political relationship of power that inscribes the bodies with variations in inequality and oppression situations. The author tells the evolution of these policies in recent decades, contextualizing the Brazilian insertion in this debate and in regulatory formulations in the international arena; and highlights the publication by the WHO of the International Classification of Functioning, Disability and Health (ICF) in 2001. It emphasizes the assessment of the consequences for a person’s life of a condition that can lead to restrictions of his freedom. Although it recognizes the important progress made in Brazil after the 1988 Constitution, Santos believes that public actions aimed at disabled person still face difficulties linked to inescapable requirements of interdisciplinary and intersectoriality in formulating and implementing these policies in order to meet the enormous diversity of the demands of these people.

The final chapter of the book presents the reader with the challenge of a new way of thinking about drug policy and framing the future in this area. Denis Russo Burgierman starts saying that the use of psychoactive substances is an anthropological constant, i.e., it exists since always, in virtually all human groups, and that living with this situation was marked by a regulatory guidance of cultural nature until the beginning of last century. That is when began a policy to ban and criminalize the use of these drugs, which progressively infected everybody. Burgierman exposes extensive discussion around the two schools of thought that have dominated public policy on drugs in the second half of the twentieth century: the War on Drugs (WD) and the Harm Reduction (HR). Finally, he discusses the latest trends of easing the dominance of combat strategy, as a sign of a transition that moves towards new regulatory approaches.

Concluding this presentation, remains the hope that the preparation and dissemination of this publication will contribute to better understand, evaluate and guide decisions about the problems that are part of the debate on international relations, helping to clear up topics relevant to the future of humanity health, in the case in question, diseases and chronic conditions. The renewed hope that the shocking omen of Dominique
Kerouedan does not represent a final condemnation remains. “Neither altruism nor philanthropy explain the concern of the great nations with global health, but economic, geopolitical and security interests.” That each reader can draw his own conclusions and choose a side.

José Paranaguá de Santana

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