



OBJN
Online Brazilian Journal of Nursing

ENGLISH

Federal Fluminense University

AURORA DE AFONSO COSTA
NURSING SCHOOL



Editorial



Social determinants for nursing

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Between 19 and 21 October 2011 occurred in the city of Rio de Janeiro the "World Conference on Social Determinants of Health."

Since 1978, in other words, Cold War period, never an event of such magnitude on the themes of health was held outside New York. The final document entitled "Political Declaration of Rio on the Social Determinants of Health"⁽¹⁾ was endorsed by the governments of 120 countries, which central theme was the equity and access of population to services, medicaments and assets essential to life.

Points of interest to the entire scientific community and population includes the understanding that health equity is a shared responsibility and requires the involvement of all sectors of government, from all segments of society, and all members of the international community.

It was found that there are five key areas of action for the control of health inequalities:

1. Adopting better governance for health and development;
2. Promote participation in the formulation and implementation of policies;
3. Redirect the health sector through the reduction of inequalities;
4. Strengthen global governance and collaboration;
5. Monitor progress and increase responsibility.

On the other hand, civil society has also developed an additional document, which converges with the main points in the official document of the Conference, but which emphasizes the urgency that government officials adopt more effective actions to address the 'structural determinants', which generate/perpetuate various social inequities⁽²⁾.

What is flagrant with the two documents mentioned is that there is public concern about the historical gap between talking and doing, between programming and executing, between intention and action, between the description and intervention.

Transposing the macro-structural contradictions of the social determinants of health for nursing as a participant in this process, it is necessary the stimulus and development of researches that transcend the mere, but not less important DESCRIPTION, for those of INTERVENTION: because for those who suffer for what matters is the last. Boff states that care is more than an action; it is an ATTITUDE⁽³⁾.

The intervention studies in nursing come along with the logic of Evidence Based Nursing, widespread since the second half of the twentieth century. Naturally, the journals will steadily express this change in the profile of critical mass in nursing: good for the profession, good for the patient, good for the social determinants of health.

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