

"For a unique, solidarity-based, quality and non-commercialized health system, let us promote popular participation!"

Summary of the XVI Latin American Congress of Social Medicine and Collective Health & the XX International Congress of Health Policies (translation from Spanish from [DeepL](#))

Under the slogan contained in the title of this text, the XVI Latin American Congress of Social Medicine and Collective Health and the XX International Congress of Health Policies, organized by the Latin American Association of Social Medicine and Collective Health - ALAMES, were held in the beautiful venue of the Autonomous University of Santo Domingo, Dominican Republic, during the third week of November of this year.

It was a congress carried out in a mixed modality: face-to-face, with a lower participation than the traditional one of these congresses, along with virtual participation, which configured an interesting space for deliberation, but without the sufficient energy of the joy of collective in-person meetings and with the difficulties that virtual participation entails.

Panels were developed, papers and research works were presented and debates were held around five thematic axes: 1) struggle for health and political and social confrontation in the context of the COVID-19 pandemic; 2) Challenges in the definition of counter-hegemonic health policies and systems; 3) Contributions of social medicine and collective health in the defense of the struggle for health and life; 4) Counter-hegemonic knowledge and practices and 5) reforms and counter-reforms in health; next scenarios.

Although participation was irregular, there were important debates within the framework of the new social and health context imposed by the Covid-19 pandemic and what this has brought along in terms of social and health inequalities and inequities and the inoperability of privatized health systems, and as an expression of a civilizational crisis that demands a profound change in society and its relationship with nature.

The following is the final public declaration of the congresses, signed by the attendees and virtual participants on November 19 of this year:

We, the participants in the XVI Latin American Congress of Social Medicine and Collective Health and XX International Congress of Health Policies, gathered in person at the Autonomous University of Santo Domingo, Dominican Republic, and remotely from different countries, between November 15 and 19, 2021, present to the peoples of the world the main considerations and proposals as a result of the pre-congress events and the five thematic axes discussed in the congress program, with the intention of contributing to the transformation of a state of affairs in health that is ethically and politically unacceptable to us.

The pandemic of the new coronavirus disease (Covid-19) has put health and life on the world agenda as the main concern of the whole of humanity. At the same time, the pandemic has made visible the matrix of inequality accumulated in the Latin American region, in the global South as a whole and within the countries of the global North. These inequalities are based on relations of power and domination that are produced and reproduced in the colonialist, racist, patriarchal and predatory capitalism in which we live and which has become so naturalized that there seems to be no other option.

The institutional response of the health and social protection systems has been overwhelmed in most countries. But this is not a natural result. It is a consequence of the neoliberal and neoclassical reform agenda that guided the dismantling of public social protection systems and, in particular, of

public health care services, through different routes of privatization and commodification. This agenda has promoted the accumulation of capital in the medical industrial complex, as the spearhead of today's cognitive capitalism, dominated by the technologies of the so-called fourth and fifth industrial revolution, based on intellectual property rights that have expropriated the common good of knowledge. These rights, called patents, support the unjust global inequality in access to vaccines against Covid-19 that we are experiencing. This perverse dynamic explains the job insecurity of health sector workers and their systematic lack of protection, while they are named with the euphemism of "heroes" in the face of the deadly pandemic.

This regime of accumulation has transformed the world of work and has led workers to believe that we workers are entrepreneurial one-man enterprises. We are supposed to be able to live better if we use our personal effort correctly, while we are exploited and forced to produce by consuming, from information and communication platforms protected by more and more patents.

These privatization mechanisms mean that the public resources available for social protection in national states are transferred, without benefit of inventory, to an increasingly voracious, concentrated and oligopolistic private sector, represented by huge transnational and national consortiums that profit from the suffering of people and communities. These financialized consortiums, including the pharmaceutical industry, sponsored by international organizations and many national States, are the main beneficiaries of the Covid-19 pandemic, at the expense of deepening inequalities, pain and avoidable death.

The demands of the pandemic led to different experiences of recovery and strengthening of territorial governance of health and rethinking of the public response of health services, from the collective vision and human interdependence that became evident with the health emergency. These initiatives can guide processes of profound transformation of health systems, from a rights-based approach that overcomes commodification. But this is not enough.

In all our countries we witnessed multiple forms of social and community organization and mobilization to overcome the challenges of the pandemic and the lack of adequate institutional response. These social movements, especially those of young people, women, indigenous peoples and Afro-descendants, demand the construction of another world and another way of life, not simply inclusion in markets. And all of them continue to be punished, repressed and subjected to State violence. From this accumulated malaise, it is necessary to build alternatives, in processes of unity and articulation of the peoples in our region, in the global South and in the excluded spaces of the global North.

Colonialist, racist, patriarchal and predatory capitalism sickens and destroys planetary life, because it has commodified life, exploiting and destroying it. If this is so, the option is the struggle for life from a harmonious society-nature relationship. Work is the organizer of social life. If it has become a kind of every man for himself, the option is to direct work towards the care of planetary and human life.

If there is a civilizational crisis of this predatory capitalism, it is not possible to achieve sustainability within the same framework. It is a crisis of scientific-technical rationality that has reached its limit, as a supposed universal truth. Overcoming the crisis of this rationality implies recognizing other rationalities, other sensibilities, other knowledge and other practices.

For all of the above, we turn to the ancestral proposal of *Buen Vivir* (Good Living) of the peoples of Abya Yala, but also of many peoples of the world excluded by European colonization and the systematic and persistent coloniality of contemporary capitalism. *Buen Vivir* is not simply a concept. It is a worldview from another rationality. It is an alternative to predatory, colonial, patriarchal and

racist development. It is not a superficial cultural adaptation of goods and services from the dominant scientific-technical and biomedical thinking.

Similarly, taking up the challenge of depatriarchalization is not an adaptation of policies and services to women's demands. Patriarchy is a totality that oppresses simultaneously, intersectionally, the daily lives of people as well as planetary life. For this reason, cultural and gender diversity, as well as the integrality of collective, physical-mental health, demands a structural transformation of the way of life of peoples and society as a whole.

Consequently, the struggle for health today means the struggle for life as a whole. It means the demercantilization of life, from the proposals of multiple knowledge, historically constructed, in a situated and territorial way, for the care of life. It also means assuming health and knowledge as common goods, not commodified goods through patents. It means the full interdependence of human, collective and natural rights, as obligations of the States, from a new public institutionality. It also means the struggle for unique and diverse health systems, both public and territorial, which, in addition to caring for the sick from multiple knowledge in dialogue, contribute to the conservation and care of life, from a biocentric, not anthropocentric, and less, androcentric, society-nature relationship.

We call on the peoples of the world to build together this proposal of pluriverse health, for the care of life in all its expressions. *Buen Vivir*, gender and cultural diversity are emancipatory metaphors for the transformation of a socially and historically created situation that we refuse to accept. As political subjects, we are capable of constructing the option for life and changing the course of history. I am, if we are. We are and we can transform this unjust reality.

Santo Domingo, November 19, 2021.