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Masters in Collective Health: pathway of challenges and possibilities

Maestría en Salud Colectiva: camino de desafíos y posibilidades

Mestrado em Saúde Coletiva: caminho de desafios e possibilidades

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The masters program in Collective Health at Universidad de Antioquia reaches its 20 years. This fact constitutes a motive of satisfaction, recognition, and gratitude: to the directors at Universidad de Antioquia who have made it possible for this program to be maintained and have the parameters of a graduate program, sustainability, and evaluation established in the institution and in the national and international context; to the students and alumni who have opened the field of questions and have positioned relevant problems and new debates; and to the professors who in the most committed manner have contributed with their experiences, reflections, and knowledge acquired through research, formation, and outreach and with the best of their intellectual work.

This anniversary means the challenge of continuing the journey amid a social context where turbulence predominates and, in spite of the scientific and technical progress, an inequitable, excluding and individualized reality is maintained and intensified, with huge doubts on health for the majority of the population. In this scenario, the academic program acquires the urgent need to understand the social processes and the evidence of the infeasibility of a development model that privileges the logics of the market in detriment of human wellbeing.

While the base of collective health is the social reality, one of the main challenges of the program is to understand that its objects of knowledge and transformation are defined amid adversities, possibilities, and construction of utopias to advance in the purpose of *promoting and defending life*. Persisting on this entails updating the

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necessities that led to the creation of the program, which undoubtedly continue in effect, namely: recognize the power of the social sciences to consolidate a thought that transforms practices in health; maintain the sociopolitical debate and analysis of the problems of the local, national, and international contexts; strengthen the commitment with the analysis and development of health practices that transcend the biomedical model, and streamline the formation of researchers with social sensitivity and capacity to recognize and respect the socio-cultural diversity of the Colombian population.

A result of the 20-year trajectory is the cumulative of 72 alumni from disciplines like physical education, medicine, odontology, nutrition, physical rehabilitation, psychology, nursing, social communication, anthropology, social work, political sciences and sociology; a living expression of the wealth that entails overcoming disciplinary fragmentary approaches toward more complex comprehensive processes of diverse social and human issues. Likewise, these 20 years have consolidated progress related to the production of knowledge pertinent to the collective healthcare field, mostly derived from the exercise of qualitative research. Great thematic/problematic nodes have occupied us:

- Approach to the health-culture relationship, focusing the view on particular and problematic practices related to the worldview and the traditional knowledge of health and disease of indigenous communities in the Department of Antioquia.
- Research centered on the perspective of the subjects on diverse processes that touch their vital trajectories, in an effort to overcome the conventional biomedical vision of classification of the vital cycle and advance in the consideration of human groups constructed and consolidated around shared social, cultural, and territorial experiences: youth, communities subjected to forced displacement and political violence, women, mothers, relative caretakers, LGBTBI collectives, and professional groups, among others.

- Exploration of health practices and their associated discourse, from their institutional and community versions, in relation to participative processes and health education processes.
- Inquire on living conditions and everyday activities in local contexts and their role in the production of health, disease, and wellbeing, as well as the configuration of citizenships in contexts of inequity and the precariousness of life and new contradictions around the work and health relation.
- Critical approach to public policies, social policies, and health systems, under the legal perspective, to problematize their dynamics and reach in governance and management of the public, from the perspective of the players and within the complex context of the territory.

For the masters in collective health, this anniversary implies maintaining an inescapable task in three spheres of intellectual work: epistemology, methodology, and praxeology. We agree with Edmundo Granda,¹ who invites us to locate the challenges around the metaphors of the “power of life”, “of knowledge”, and of the “good political power”. This leads us to recognize the dangers regarding the centrality of the morbid and mortality in the analyses and practices, losing site or reducing the vital perspective and in that path, forgetting that the sense of the collective is constructed, not as an *a priori*, but fundamentally in function of concrete realities and contexts. Consequently, if the genuine interest is placed on life, welfare, and health, it will be necessary to problematize the scopes, theories, and methods of knowledge instituted, incorporating the expectations, accumulated knowledge of groups and communities, their everyday activities and the culture in which health is created. In this sense, a complex vision is increasingly necessary, which offers us comprehension and commitment with the social reality, to understand the relations between subjectivity and inter-subjectivity, the whole and the part, the universal or abstract and the particular or concrete; overcoming fragmented, reductionist views and with totalizing

pretensions of the positivist paradigm, which hinders development of knowledge in the field of health/society relations.

Finally, this will lead us to that ethical terrain political par excellence of the praxeological, where the biggest challenges will be the pertinence and relevance of the responses that can be consolidated from the masters in collective health, in connection with the socioeconomic and political context of the region and the country. That is, advance in the sense of a social action in health that bridges the gap among practice, theory, and research and allows us to respond to social demands and commit to the defense of life and with the welfare of communities; a collective ethics that permits consolidating shared convictions on solidarity, experience, equity, honesty, freedom, autonomy, and respect for differences.

In the future, the program of the masters in collective health must face the epistemological and theoretical challenge of overcoming and debating the multiple polarities of modern thought, constructing comprehensive and complex methodological approaches that permit advancing in an exercise of political incidence that affects health practices and the conformation of groups and communities committed to ethical and political projects.

The invitation remains, then, proposed to celebrate and reflect by retaking the commitment

with our society and centrally with the generation of knowledge that permits reviving silenced voices, recognizing their tonalities and rhythms. We need to delve into explicative models of that complexity that is health. And from the individual and the collective to continue our path entails, as proposed by María Teresa Uribe,² Colombian sociologist, and Hugo Zemelman,³ Chilean epistemologist, to dare to “see in the dark”, permitting our venture into other paths, without resting peacefully on the certainties and securities granted by the accumulated knowledge we bring, and rid ourselves of ritualistic attachments to the canons of certainty; this is an exercise of urgent intellectual responsibility.

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