

The syndrome of social exclusion

A síndrome da exclusão social

Antonio Benedito Lombardi¹

DOI: 10.5935/2238-3182.20140066

Belo Horizonte, April 21, 2014

Dear Editor,

I present to you the book “The Syndrome of Social exclusion” fruit of my work during the period from 1978 to 2010 in the Department of Pediatrics at the Medical School at the Federal University of Minas Gerais (FM-UFMG).

The work that originated the book began in the second half of the 80 decade. On that occasion, I created an outpatient child psychiatry clinic, which operated during a certain period of time in the São Vicente de Paula ambulatory from the General Hospital complex from FM-UFMG. After a few months of operation I realized that most of the referred children (from clusters, villages, distant neighborhoods, and even from the countryside of Minas) featured issues related to school as the main complaints. I concluded that school problems should not be addressed in an outpatient clinic located in downtown Belo Horizonte but near the domicile of these individuals where better integration between health and education could be more promising.

Thus, sometime later, I started working in a community. This was only possible thanks to the curricular change at FM-UFMG, which resulted in the creation of internships in health clinics on the outskirts of BH, so named at the time.

On occasion, as a starting point, I felt the need to better understand the biopsychosocial profile of the child who joined the school cluster. This resulted in a research project (1990) that became a master degree thesis (1995).

I noted that:

- long before joining school, children had been exposed to multiple risk factors;
- the vast majority was already biopsychosocially impacted when joining school;
- three years after the first evaluation (1993) the school difficulties in the examined sample was extensive.

During the period from 1995 to 2008, I verified in the field work that school difficulties were like the tip of a giant iceberg named social exclusion, a complex and multidimensional phenomenon, potentially capable of producing devastating effects and much worse than school difficulties. These, in turn, were just one of the multiple symptoms.

I detected that, in the case of Brazil, the phenomenon of social exclusion is closely connected to our history of environment exploitation and especially, to the slavery of Indians, blacks, and their descendants. It perpetuates to this day, by the excluding

¹MD, Psychiatrist of Childhood and Adolescence. Ph.D. in Pediatrics. Professor in the Department of Pediatrics at the Medical School at the Federal University of Minas Gerais - UFMG. Belo Horizonte, MG – Brazil.

Submitted: 2014/04/22
Approved: 2014/04/23

Institution:
Medical School at UFMG
Belo Horizonte, MG – Brasil

Corresponding Author:
Antônio Benedito Lombardi
E-mail: lombardiab@uol.com.br

culture of indifference, initially materialized in slavery and currently in public policies unable to provide a true and definitely liberation of the population affected by this Brazilian Holocaust.

These discoveries about the exclusion led me to revisit the work in the master degree thesis. The year was 2008. Eighteen years had passed since that research. The following question could not be avoided: what happened with those children examined during that research?

One of the ways to respond was through other research. And so it was done. Out of the 39 children whom I had examined, I was able to locate 28. Out of these, 26 agreed to participate in an interview.

I noted that:

- the children victimized by the phenomenon of social exclusion are exposed to multiple biopsychosocial risk factors, since pregnancy and in every initial periods in the life cycle (neonatal period, infant, pre-school, school, teen, young adult);
- those people, in many moments of the study, primarily upon entering school, were impacted in multiple ways, i.e., simultaneously presented physical, psychological, and social symptoms. The findings also suggest that these multiple impacts occur in all periods of the life cycle;
- in the adverse conditions where they lived, some of those people in the study, as well as family and friends, became vulnerable to two very significant events among us: the first, increased predisposition to use and abuse drugs, probably as a resource to relieve the subjective negative impacts; and the second, which predisposes the subject to a high risk of entering the drug trade as a way to solve problems of affective, financial, and personal development, all threatened by adversity. Both events have often violence, arrest, and death as outcomes, facts that are very present in our current society. The knowledge of the occurrence of these events was one of the most significant contributions of the study;
- in young adulthood, the social insertion in practically the entire sample was very fragile, which could aggravate further the already vulnerability of the studied sample.

The final impression is that this set of symptoms has a well-defined origin and an evolutionary framework more or less uniform and predictable. The description of the framework facilitates the intervention and, above all, indicates pathways to prevention, promotion of quality of life, and choice of places where such measures need to be put into practice, in this case, the community.

Thus, finally, I can only clarify how the association of social exclusion with multiple symptoms occurs. I understand that:

- the culture of indifference and exclusion began in the country with the colonization and in the predatory and slavery form;
- this exclusionary culture exerts its harmful effects materializing itself as risk factors and aggravating existing ones;
- finally, these risk factors, almost always multiple and concurrent, provoke a biopsychosocial impact on the subject. These impacts, by themselves, are auto-excluding and, once interacting synergistically with perpetuating extrinsic risk factors, push the subject into the spiral of social exclusion despite the resistance offered by present inclusive actions.

Dear editor, therefore, after this description, I am presenting this work for your evaluation and thus, be able to announce to the medical community this framework, which I refer to as “The Syndrome of Social exclusion” which, was recently converted into an electronic book (Kindle e-book) edited by Editora Folium that can be found at Amazon.com.br. I am sure this book makes a solid bridge between our history and geography and the unfavorable health conditions in much of the population that began in a moment very sensitive and critical as are the initial periods of the life cycle.

Sincerely, I appreciate it,

Antonio Benedito Lombardi.