

## 10<sup>th</sup> Brazilian Congress of Epidemiology: building our field with solidarity

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The 10<sup>th</sup> Brazilian Congress of Epidemiology (Epi 2017), held in Florianópolis, Santa Catarina State, on October 7-11, 2017, drew more than 3,100 participants and 250 guest speakers, reaffirming its position as one of the world's largest epidemiology congresses.

The event took place in a context of serious threats both to Brazilian Unified National Health System (SUS), the development of Brazilian science, and the various social policies that have been implemented since the 1988 *Constitution*. The scientific committee adopted the theme *Epidemiology in Defense of the Unified Health System: Teaching, Research, and Intervention* for the congress.

Brazilian epidemiology has a history of combining methodologically rigorous research with the commitment to lend meaning to the resulting knowledge through its incorporation by health policies and programs. This relationship between theory and practice was reconfirmed at Epi 2017, a particularly important moment in the context of pro-market and austerity policies that clash with the commitments to social justice and equality that have marked the Brazilian health reform movement.

The congress program was structured along a set of thematic lines: rigorous, comprehensive, and sustainable knowledge production; development and evaluation of interventions aimed at strengthening the SUS and health policies and programs; and training in epidemiology. According to the scientific committee, these thematic areas, developed in conferences, courses, round tables, and lectures, allowed addressing the most relevant questions for Brazilian epidemiology, expressing recent methodological developments in Brazil and the world, and applications to improve the population's living conditions.

We debated the crucial role of scientific and methodological advancement for overcoming economic crises, analyzing evidence against the current government's policies in Brazil, which involve drastic budget cuts for science and technology. We observed how recent fiscal austerity policies in Europe have negatively affected the health of populations on that continent. We analyzed Brazil's own experience, focusing on the impact of social policies like Bolsa Família (Income Transfer Program) and the Mais Médicos (More Doctors) program.

We listened proudly to the collective work of a group of researchers and medical, surveillance, and laboratory professionals from the SUS, with the support of the Brazilian Ministry of Health and other public agencies, and how they successfully identified the

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previously unknown association between Zika virus infection and microcephaly. We are keenly aware that this is the result of medium- and long-term investments in training and research, collective work, and infrastructure.

We dwelt at length on various methods: causal inference, machine learning, methods applied to hard-to-reach populations, mediation analysis and DAGs, and linkage of large databases. We spoke of the limits and potentialities of more recently developed methods and techniques for studying causal relations and making predictions, taking complex determination into account. Although fascinated by the novelties, we were warned that without a good research question, “methods, no matter how sophisticated, are not sufficient”. Attuned to research integrity, we debated open data and data sharing.

We discussed problems that we have studied for years such as social inequalities and their repercussions on health and that we continue to examine with new method; we spoke of the world’s Sustainable Development Goals, abortion, cesareans, neglected diseases, violence, and the workplace; we presented an overview of studies in nutritional epidemiology, indigenous peoples’ health, oral health, and health surveillance. And in line with new challenges in public health, we discussed the anti-vaccination movement, the health of the transsexual population, migrants, and refugees, racism, climate changes, and urban health.

The congress also included training in epidemiology as a thematic line. We analyzed how we are teaching the discipline at various levels. In this edition we presented what we are doing currently, and future editions will address the challenge of analyzing new teaching approaches that continue to stimulate a new generation of epidemiologists. We reflected on the challenges of conceiving a new university, drawing on the experience of Federal Universidade of Southern Bahia.

On an organizational note, the 10<sup>th</sup> Brazilian Congress of Epidemiology incorporated the gender perspective in the composition of the round tables and in promoting gender equity in science production by creating spaces for children and breastfeeding and guaranteeing an alcohol-free and smoke-free environment at the venue, besides restrictions on the sale of unhealthy foods. We encouraged participation by local producers in all the congress spaces and services, especially for the food services. There was also a major concern with sustainability. The congress used biodegradable pens and bags and nametags made of recycled paper and containing seeds for planting, besides eliminating the large-scale use of paper and plastic, rationalizing print materials using a smartphone app to distribute the event’s program.

The participants rated these organizational aspects very positively. We welcomed 35 children ranging from six months to ten years of age, the breastfeeding area was used regularly, healthier foods were consumed on a large scale, and some two-thirds of the participants downloaded the congress cellphone app. These innovations, in keeping with the knowledge we produce, not only made the event more human, but proved their feasibility. They can and should be used in future Abrasco events and other similar congresses.

Alternative formats like the colloquiums and debates allowed expanding the program and providing space for dialogue on the professional expectations of young epidemiologists from Brazil, Portugal, and Argentina, as well as sharing the experiences of Brazilian field epidemiologists who work in international emergencies in Africa, the Caribbean, and Latin America. More than half of the congress participants were undergraduate and graduate students, and there was a highly enriching discussion on the prospects for work in academia and health services in Brazil.

The congress strengthened historical partnerships with groups and researchers from various countries, which is essential for knowledge-building. We enjoyed productive interaction between epidemiologists and researchers in the social and human sciences in health and policy, planning, and evaluation in different round tables, with a variety of theoretical and methodological approaches. This format was carefully thought out by the scientific committee and strengthened the debate. We hope to contribute to closer collaboration between the areas that form the basis for knowledge-building in public health.

Epi 2017 provided a privileged space for debate and learning, among professors, researchers, students, and workers from the SUS, on the Brazilian epidemiological context, its theoretical and methodological advances, and the huge challenge of maintaining the field's outstanding growth in recent decades, in a context of political, economic, and social crisis with threats to education, health, science, and the use of scientific knowledge to back public programs and policies.

We dare to think that we came away from Florianópolis a little wiser, full of creative energy that encourages us to persevere and do better. And we all have a full agenda until we meet again at the 11<sup>th</sup> Brazilian Congress of Epidemiology.