It begins with a brief historic of oral health, field research, interdisciplinary work, formation and different epistemological conceptions on the concept of health-disease and health system crisis.

In times when Odontology was a liberal profession, the deontologist used to arrange its fees with the patients or with the institution that sent those patients. With the introduction of health care insurance companies in the ‘70s, Argentina’s health system changed and so did the relationship between health professionals and the service provider entities. The service provision is now related to the patient economical capabilities, on the other side, this affected the relationship between the patient and the deontologist.

One of the main questions of the research raised that the knowledge area spoke of an Integral Odontology and the question was “where’s the Social?” It would be talked about DLR (Decayed, Lost and Restored) and again the inquiry would be brought up. Would it talk about human subjects with a singular life, which belonged to a particular social class, that had or didn’t have health insurance or that their mouth, entrance whole of a system called ‘stomatognathic’, could not be considered as the place from which we express ourselves or simply and by its phonetics we call us humans?

This thesis stands on the formation that professional deontologists receive and the relationship that is generated between the theoretical-practical bodies that constitute the curricula from which deontologists are formed and the labour market that they will have to face as professionals.

The labour market in Argentina has been modified in the last decades. The social and economical reality has ordered that Odontology is meant to be one of the last liberal professions.

The general aim of this thesis was focused on generating new concepts and strategies that contribute to university degree and post-degree structures, or curricula better suited to professional formation and the development of new relations linked with the labour market.
This research has gone deep into professional developments on Odontology, different methods of job placement, understanding this by the presence of 3(three) subdivisions public, private and social security and the whole dynamic generated in degree and post-degree formation related with services, technological complexity and the permanent need of training.

One of the original purposes of this research is to contribute to the Formation of Human Resources in Health field, particularly in deontological health.

From an academic point of view, this project has the intention to bind with other investigations in process in the specific discipline, as well as other convergent disciplines in health field.

This thesis involves the recognition of the epistemological framework that it means: work field, health-sickness concept, formation and labour market.

In the developed field work the concept of health-illness-assistance of deontologists in their professional work, deontologists’ job placement and its relation with their training or and specialization has been investigated.

The survey of the labour market, its relation with the social-epidemical reality of the region, will allow the University to have another vision on formation of human resources.

Intermediate organizations will also be part of the transferences of the results of this investigation, meaning that the members of these organizations may appear as agents of change and training.

The project of investigation was developed in a scenario in which the community of professionals and researchers are active actors.

Interviews to key informants of deontological profession were performed in each subsectors. Obtaining also information about motivations and problems of the population they assist. The population that is being studied is Odontology graduates who live in the city of Rosario and the so called Sistema Metropolitano Gran Rosario. This region was in the past considered as the ‘industrial belt’ as it possessed a very important group of small and middle size companies, most of them metallurgical, and has witnessed the progressive closure of many of them and the birth of a group of service companies. This brought with it, as a consequence, high levels of unemployment and the development of important groups of workers unable to replace themselves in the labour market. This economic situation generates a great amount of people who have no social security coverage and no way of paying for private services either.

The theoretical on this investigation give proof of an academic professional path in health field. Where the built object has been auscultated from an epistemological positioning, in Saussure’s words ‘the object is created by the point of view’ where the [subject gives sense to its look by directing it. It is from that place that the interdisciplinary, the health-illness-assistance process and the health politics go through and give sense to the research process.

These concepts are applied and built from the singularity of each act, of each matrix from where the word of central actors of this investigation comes: Odontology students and deontologists. To think health-sickness as a process takes us to the ways to conceptualize the causality or the determinations not only from its functional biological dimension, but also in its articulated with different social processes. It is the social what links the clinic with health, prevention and promotion. Health is a concept to be built from the different decisions that produce it: economical, social, political, legal and social-historical.
In academic formation of different disciplines linked to health, the concept of health has been excluded by the hegemony of a Medical Model (in a term from Eduardo Menéndez) whose main characteristics are: evolutionist-positivist concept, historicalness, individualism, health as merchandise, excluding legitimization of other practices, identification with scientific rationality as evident criteria of exclusion of other models, medicalization of new problematic areas, tendency to a focus dominated by a symptomatic perception, tendency to the control of quantification over quality, theoretical and practical split, tendency to split practice from investigation, identification with the urban media as development place.

Today, in the formation of human resources in health field, some certain liberal and interests are prevailed that sustain a biological and healing orientation, but the Social Sciences incorporated to the curricula, allow to think health as a value and understand that diseases are not only sanitary and clinical problems, but a social construction that is sustained through culture, political, economical and historical positioning.

A methodological triangulation strategy was proposed, this allowed us to exchange different theories and paradigms apparently opposites, generating the possibility to test them, identifying weaknesses and strengths, generating completion analysis, where the study subject was developed from a quality-quantity point of view.

A quality analysis was performed on documental sources related to the different curricula of the Odontology degree in Rosario, which crossed with the position of deontologists in relation with professional activity.

Being able to work with quality-quantity techniques allowed us to perform an analysis through processing and interviews of different opinions and concepts of the various actors. This made possible to access different knowledge and representations of social actors in relation with the study object.

Various techniques were used to obtain information: documental analysis, questionnaires, and interviews with their correspondent instruments, which were designed according to each proposed activity.

In order to be able to start solving the deep health problem in Argentina it is necessary to generate a participation process, one of and multi-institutional action, so as to be able to think of politics and strategies that allow to satisfy social demand.

It involves a wide participation of all the sectors that work in health field to program actions that instrumentalise a viable and possible health plan.

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One of the purposes of this thesis is to generate another point of view in the process of discussion and theorization initiated in Odontology field that allows placing the daily, immediate, individual and subjective, within the social, collective, historical and structural based on the study object, intending to contribute to thematic reflection.