

Health Promotion and Care Options: contributions of the Family Health Training Network in the Brazilian Northeast

Options offer us, basically, two paths: those to be followed, when already mapped, and those to be charted, when required. The options in health have challenged us in a counter-hegemonic movement in relation to the perception of our humanity. What appears to be paradoxical finds meaning in the need of those who need it – the Brazilian population – to be assisted in the guarantee of the entitlement to Health that has already been conquered. Thus, to continue following, as well as charting, the options of Health Promotion and Health Care in Brazil, and the role of the Unified Health System (SUS), allied to the networks of training and knowledge production, is imperative.

The Family Health Strategy (FHS), in its priority role in the organization of Primary Health Care (PHC), even in the midst of (de)structuring challenges, has fulfilled this mission. However, its continuous enhancement, by means of the generation and dissemination of knowledge, is mandatory for the appropriate health care of the population in different territories and in the constantly changing dynamics of the health-disease process in the sundry communities.

As we move forward in the quest for the achievement of the principles of the SUS, the need to acknowledge the determinants of the health-disease process in its multidimensionality and the requirement for public policies guided by a vision and promotion of health centered on equity, social participation and intersectorality is reaffirmed¹. The context of the COVID-19 pandemic highlighted how structural inequalities affect the production of health and ways of living, challenging scientists, managers and workers to rethink ways of providing health care and promotion.

A swift and coordinated response is needed to protect the health of all population groups. It is necessary to address the causes of the problems, act on the determinants, and make connections for the adoption of practices that take into consideration and respect social class differences, cultural affiliations, generations, sexual orientation, gender identity, and ethnicity-race aspects.

It is in this context that the central theme of this issue, entitled Health Promotion and Care Options, becomes even more relevant. The focus is on the importance of PHC, which has proven essential to overcome the setbacks that have occurred in health policies.

From this perspective, the Family Health Training Network in the (Brazilian) Northeast (RENASF) arises as an inspiring initiative, in which a set of teaching, research, and service institutions (e.g., municipal and state health departments) in the Northeastern region of the country, together, through the Post-graduate Program in Family Health, produced and have been generating knowledge, based on the ethical and political commitment to the development of research and technologies socially committed to the SUS. This initiative, exclusive for professionals of different backgrounds who work in PHC, is decentralized and involves the participation of more than 18 institutions in five states of the Northeast².

In this issue, we are invited to rethink health promotion and care in a critical and reflective manner, as we acknowledge that these practices involve the ecosystem of science and innovation, knowing and doing. The promotion and care options allow us to explore the unknown, the doubtful, the uncertain; and lead us to a place, often uncharted in the production of care.

Although there is a long way to go, the options outlined in this edition point us in the right direction. The production of technical and scientific knowledge on health promotion and care is essential, but it is equally important to incorporate its principles to the critical and practical sense of each professional, working in unison toward the same goal. It is also time to pursue the Sustainable Development Goals (SDGs), in the search for a better and more sustainable future for all.

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