

Progress and challenges in the training and qualification of professionals and public administrators of the Brazilian Unified National Health System in food and nutrition

Avanços e desafios da formação e qualificação dos profissionais e gestores do Sistema Único de Saúde em alimentação e nutrição

Avances y desafíos en la formación y calificación de los profesionales y gestores del Sistema Único de Salud brasileño en alimentación y nutrición

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Among the challenges required to qualify the actions of food and nutrition in the Brazilian Unified National Health System (SUS) – addressed in the article about the 20 years of the Brazilian National Food and Nutrition Policy (PNAN) – is that of the training of professionals and public administrators. In the 1st version of the PNAN, a training guideline was presented as transversal to all other, seeking to “...prepare human resources who can execute, from a human rights perspective, a basic agenda of activities...” ¹ (p. 26).

In the current version of PNAN (2012), the guideline defines as indispensable “...to align the qualification of professionals with the population’s health, diet and nutrition needs, and it is strategic to consider the working process in health as a basis to organize the training of the workforce” ² (p. 42).

And recognizes it as “...historical and strategic need to confront the diseases and health problems arising from the current Brazilian food and nutrition scenario” ² (p. 43).

Since the publication of the 1st version of the PNAN, food and nutrition training strategies have been developed in the SUS. These strategies were – and are – revised according to the epidemiological, institutional, technical, and political conjuncture, and according to the growth of the healthcare network, in numbers and complexity.

Between 1999-2006, there was an intensive training process emphasizing state agents — coordination and technical teams of the State Health Departments (SES), responsible for the management of food and nutrition actions—to support the enactment of programs and systems of information (Food Bag System, Brazilian Family Income Program, Food and Nutrition Surveillance System, prevention of malnutrition and micronutrient deficiencies and others), aiming to expand these trainings in the municipalities. These trainings were developed directly by the technical team of the (then) General-Coordination of Food and Nutrition Policy (CGPAN), through displacement to other states and municipalities or through events. An example: the Macro-regional Food and Nutrition Training Workshops for primary health care professionals, held between 2001-2002, organized by six Collaborating Centers in Food and Nutrition (CECAN) and the Technical Area of Food and Nutrition (ATAN) in the states and in the Federal District. A total of 280 technicians were trained throughout the country (coordinators and professionals from the Family Health and Community Health Agents programs and ATAN), on topics ranging from the human right to food, food and nutritional security

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(FNS), and the promotion of healthy eating throughout life. As a result, 22 Federated Units implemented training plans in their municipalities, based on the themes proposed by the Brazilian Ministry of Health, combined with themes relevant to each state/Federal District. During this period, there were also training programs for public administrators and health professionals of primary health care (PHC) ¹, with a main focus on food and nutritional surveillance, with support from CECAN of the Srrgio Arouca National School of Public Health, Oswaldo Cruz Foundation (ENSP/Fiocruz) ^{3,4,5,6}.

In the period 2007-2014, the partnership was formed with Fiocruz-Brasília for the training of PHC professionals and public administrators. At first, a Specialization Course in Food and Nutrition Policy Management was held, in person, adopting a model to broaden managers' understanding of food and nutrition's causal determination network; enabling them to respond appropriately to the execution, monitoring and evaluation of food and nutrition programs/policy. About 100 state and municipal managers were formed between 2007-2009 ^{4,5}. Subsequently, considering the need to expand the training capacity of public administrators, combined with the priority of qualifying professionals working in PHC, two specializations were launched, within the scope of the Distance Learning Program (EAD) of ENSP/Fiocruz: the Specialization in Food and Nutrition Policy Management, whose objective was to qualify the management of PNAN, prioritizing professionals working with food and nutrition in the Brazilian Ministry of Health and SES and Municipal Health Departments (SMS). The Specialization in Food and Nutrition in Primary Care prioritized nutritionists working in the Family Health Support Nucleus (NASF) and in the (traditional) teams of PHC. Together, these courses formed 294 specialists ^{3,4,5,6}.

Another strategy, funded by the Brazilian Ministry of Health, was the creation of the SUS Food and Nutrition Network (RedeNutri), in 2009. It was a virtual space, permanent and collaborative, for the reflection and exchange of information and experiences on the strategies and actions for the implementation of PNAN. Among its objectives are the contribution to the expansion and qualification of food and nutrition actions in the different aspects of health care and to the continuing education of professionals involved in the realization of these actions, through the provision of self-instructional EAD. Its management was made by a Steering Committee – Observatory of Food Security and Nutrition Policies, University of Brasília (OPSAN/UnB); CGAN and the Pan-American Health Organization (PAHO/WHO) in Brazil; the production of the content was up to OPSAN and its validation to CGAN ^{3,4,5,6}.

These training strategies are added, adapted and expanded according to the investment needed for the qualification of managements and in the enactment of new actions, strategies and themes (e.g., Breastfeed and Nurture Strategy, NutriSUS, Promotion of Adequate and Healthy Eating), with emphasis on PHC. There were substantial investments made for the Brazilian Ministry of Health's technical and financial resources for the production of educational materials (thematic notebooks, guide protocols, instructional, manuals), and various courses for professionals/public administrators. However, the scope of such initiatives has always fallen short of what is needed ^{3,4,5,6}.

In the period 2015-2019, partnerships with public Higher Education Institutions (HEI), financed by Letters of Agreement or Decentralized Implementation Terms, were expanded. In 2018, CGAN – to leverage the training process – innovates by launching Public Calls, in partnership with Brazilian National Research Council (CNPq), directed to these HEI; aiming to select training-research-extension projects, for the prevention and control of obesity in PHC ⁶. Although there are no results of the projects enabled in these Calls, since they are still in progress, the tendency is to maintain this modality among the strategies to advance the training of food and nutrition public administrators and professionals in the SUS, with emphasis on PHC ^{5,6}.

The training should involve essential themes for SUS daily practices – from nutritional care, involving workers in healthcare; to management, dealing with the formulation, planning, monitoring, and evaluation of food and nutrition programs and actions. However, the dynamics of social and economic relations impacts the conditioning/determinants of health, food, and nutritional security and, consequently, the food and nutrition profile of the population. This has an effects on the list of actions to be offered by the SUS, and on the organization of work processes. Thus, new knowledge and practices are required of public administrators and professionals. Therefore, the training process should be continuous and systematic – a basic presupposition for expanding the problem-solving capacity of nutritional care, especially in PHC.

This is also desirable due to the precarious ties professionals have with the SUS. The void caused by the non-implementation of Career, Positions and Salaries Plan (PCCS) of the SUS for employees of the three spheres of government – a recurring theme in the Brazilian National Health Conferences – requires continuous and systematic cycles of training.

To establish effective and permanent education programs, it is essential to produce evidence, not only for nutritional care, but also for aspects related to the process and organization of public management at different levels of health care. What and how to do it? How to organize and evaluate? Who to involve? How to build in scale and in a qualified way? With what tools? These are questions that remain on the horizon of national management, especially considering the discrepancies and inequalities that are manifested in the – administrative, technical, political and budgetary – (in)capacities between states, regions and municipalities.

Managing public policies and programs is, almost always, managing the historical and recurring scarcity of financial, physical, and technical resources. Technical and academic training must be articulated for the complex reality of the SUS; its rules, problems, potentialities, processes, procedures, and organization. Aligning the knowledge and technical skills of nutritionists, for example, with the demands of the population, and with the SUS (and PNAN) managing and operating systems remains a challenge.

For these reasons, regarding the qualification of healthcare workers, the management of PNAN continues to be challenging. We would like to highlight the potentiality and particularity of a possible “reinvention” of CECAN. An initiative adopted in the 2000s, which was in force until 2011, boosted many PNAN actions, including the development of research and training strategies; management training and support; and implementation of programs and actions in SUS subnational spheres. Present in public HEIs, they were strategic partners; combining the teaching-research-extension tripod to develop tools, technologies, modalities and innovative proposals/strategies to articulate the needs of the SUS in the training of food and nutrition professionals and public administrators.

No matter the training strategies, none can do without information technology. It is necessary to scale the permanent training (in service) of multidisciplinary teams and PHC public administrators. The investment in distance learning and platforms, such as SUS Open University (UNA-SUS), recently used, are very promising. The size of the SUS justifies this statement, considering the number of teams and health professionals to be reached.

In addition to these challenges, other elements of reflection must be added in the construction of plans/programs for the pedagogical training of public administrators and health professionals. These plans/programs should articulate with the specificities, diversities, and inequities found in the territories where they operate; seeking to reduce the gaps of locoregional, economic, social, cultural, gender, ethnic-racial and generational inequalities.

Overcoming these challenges requires a permanent articulation of public management with training centers. CECAN can and should be leveraged to generate evidence and to support effective proposals and strategies for the qualification of food and nutrition professionals and public administrators on the SUS agenda. Additionally, they can be collaborative bodies, of a more permanent nature, to support the institutional references (state/municipality) of food and nutrition, and to boost local management and qualification of public administrators and health professionals for intra-sectoral management and inter-sectoral. Thus, advancing – concretely and resolutely – for the implementation of PNAN guidelines, properly aligned with the specificities of local policies, programs, and realities.

Additional information

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