

## Health services research and the COVID-19 pandemic

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I write this editorial at a time of mourning in Brazil. Mourning for the people who have died in the COVID-19 pandemic. Mourning, knowing that many of these deaths could have been avoided. Mourning because we have a government focused on dismantling the Brazilian State and that turns its back on the pandemic, taking a denialist stance, shirking its responsibilities, flaunting misleading attitudes in communicating with the Brazilian people. The governance structure of the Brazilian Unified National Health System (SUS), developed successfully over the course of many years, was sidestepped in an intentional and unexplainable government move that appears to allow the epidemic virtually run its natural course.

Countering the Federal Government's omission, some local governments, healthcare professionals, specialists from widely diverse fields, members of Congress, jurists, and social movements have engaged in the debate and in the struggle to mitigate the pandemic's effects. Imbued with this spirit, organizations in the Front for Life Movement, led by the Brazilian Association of Collective Health (Abrasco), launched the National Plan to Fight COVID-19<sup>1</sup>. These are proposals, plans and debates that brought health services and systems to the center of attention. The supply of ICU beds and mechanical ventilators, the role of primary healthcare, the availability of personal protective equipment, and the efficacy of medicines in COVID-19 prophylaxis and treatment have become concerns for all of society, extending beyond the experts and debated by everyone.

The pandemic caused by SARS-CoV-2 suddenly forced health systems to deal with a growing demand, in some cases extremely high, from severe cases of a highly contagious disease, with previously unmapped clinical conditions, and without an available specific treatment. If adequate control measures are not adopted, the speed of transmission can generate an overwhelming demand on health services, especially services with higher complexity, even for health systems in high-income countries. The virus can also cause many deaths, since COVID-19 has a high case-fatality rate compared to other flu syndromes. The expansion of points of care and their reorganization in a specific line of care, linked to the healthcare network, proved necessary to improve the system's effectiveness and save lives<sup>2</sup>.

Since COVID-19 is a previously unknown disease, it raised challenges for widely diverse fields of action, including health services research. Since the beginning of the pandemic,

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the efforts by science to identify and develop safe and effective therapeutic and preventive regimens take place at a speed and intensity never seen before. The principles expounded by Scottish physician Dr. Archie Cochrane in the early 1970s called attention to the importance of knowing the efficacy (called “effectiveness” by the author) of health procedures through controlled clinical trials, opening the way for the emergence of Health Technologies Assessment (HTA) and Evidence-Based Medicine that have been adopted throughout the world. Cochrane’s famous book *Effectiveness & Efficiency: Random Reflections on Health Services*<sup>3</sup> called attention to the high degree of misinformation in 1970s society (as still exists today), where many people are unable to distinguish opinion from scientific evidence, emphasizing the importance of evidence when adopting new procedures in routine health-care. Archie Cochrane emphasized the relevance of health assessment to orient professionals’ decisions and to guarantee healthcare’s effectiveness, thereby decreasing suffering and sequelae and saving lives. His reflections on efficacy extended beyond preventive, diagnostic, and therapeutic procedures to incorporate health services organization and the process of care. He also addressed the issue of social and territorial equality in healthcare, focusing on essential themes in health services research that are now permeating the debates on the challenges involving the mitigation of harms from the COVID-19 pandemic.

The Thematic Section on health assessment in this edition of CSP features articles<sup>4,5,6</sup> by renowned researchers. The articles allow us to retrace the research paths in this field, particularly since the latter half of the 20th century, when seminal authors began to publish their work. We can also share their thoughts and critiques on the future of health services research. Note that the articles were written before the pandemic and thus do not include its probable impacts (given COVID-19’s magnitude and potential for change) on health in general and health services research in particular.

I wish to emphasize the privilege for *Cadernos de Saúde Pública/Reports in Public Health* of including in the edition the autobiographical paper by David Banta<sup>7</sup>, one of the founders of HTA and a highly valued collaborator of Brazil. Among other stories involving his work and the friends he made in Brazil, Banta tells about his fruitful meeting with Cochrane in the United States and the impact this had on the emergence of HTA.

Lilia Schraiber, the guest discussant for the Thematic Section, read the set of articles as a historiography of health services research<sup>8</sup>. Her analysis found a historical trend of segmentation in the object of such research, health services, which creates the risk that services will be viewed as objects outside the social world that defines them. Thus, even as the complexity of healthcare opens the way for various research watersheds, we are urged to reclaim the significance of health services in their intricate relationship with society.

We are at a time in history when we cannot ignore the possibility of new health crises adding to the current climate crisis. Such events, with unpredictable severity, call urgently for the strengthening of universally accessible, integrated, and safe health services with broad and speedy response capacity. The transformations underway in health systems and services will affect the patient care settings and may lead to the exacerbation of social and territorial inequalities in access to effective healthcare. The big businesses that increasingly involve the development and marketing of equipment, medicines, and immunobiological products<sup>9</sup> underscore the widening gap between health needs and healthcare supply. Democratic societies that value and strengthen science will be the best prepared to organize in response to future uncertainties and to save lives in the process.

## Additional information

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