EDITORIAL (ESCOLHA DAS EDITORAS) EDITORIAL (EDITOR'S CHOICE)

The Brazilian Unified National Health System and the civilizational project: scenarios, alternatives, and proposals

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Participants in the 4th Brazilian Congress on Health Policy, Planning, and Administration, meeting on a virtual platform on March 22-26, 2021, saluted the future in the lectures, debates, roundtables, and oral presentations as an expression of the right of all to health and life. Now more than ever, the Brazilian Unified National Health System (SUS) needs to be defended as a source of pride and beacon of hope for the Brazilian people.

In the opening session, Jurema Werneck called for social and political activism with her lecture on *Inequalities and the Pandemic: What Democracy is Necessary for a truly inclusive project?* Her provocative question set the tone for what proved to be a vivid, combative, and heated congress, belying our fearful expectations concerning what might have been a cold, remote virtual format. It was difficult to make the decision to hold an entirely virtual congress, the first of its kind organized by the Brazilian Association of Collective Health (Abrasco).

The congress's design was intensely participatory ^{1,2}. For nearly two years, a group of 80 researchers from the area of health policy, planning, and administration, representing the entire country, served as the scientific committee, which grouped the congress activities in 10 thematic areas.

The organization of the thematic areas aimed at an in-depth analysis to allow identifying new strategies and approaches in planning and administration for defending the Brazilian population's right to health ³.

The scientific committee intentionally assumed that the backbone for the congress would be the coordinated synchronous and asynchronous communications, in which the various social actors from the respective areas presented their research production. This dynamic facilitated the dialogue with new researchers joining the field and creating a new critical mass in the health sector.

Among the thematic areas, *Health Planning, Administration, and Assessment* featured the most papers (197), and *Federative Relations and Health Regionalization* and *Science, Technology, Innovation Policy* received the least, with 36 abstracts each. *Hospital Policy, Administration, and Patient Care* and *Healthcare Systems and Networks* received 57 and 48 abstracts, respectively, to cite just two other examples of the field's vast but unequally distributed research production. This may merit a more detailed study of the relations between stimulus for

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² Faculdade de Saúde Pública, Universidade de São Paulo, São Paulo, Brasil. scientific production, the formation of new research groups, and pressing demands from the SUS and Brazilian society.

In the presentations and debates of the 326 papers that were approved for oral presentation and the 736 papers in the asynchronous communications, the diversity of methodological approaches allowed a rich epistemological debate on the health emergency, threats of new pandemics, and the establishment of egalitarian and emancipatory ways of life.

In the synchronous communications, the thematic organization allowed interaction between reports on experiences and research, thus making the difference by putting the world of practice and life in contact with the best research production and innovations in the field of Health Policy, Planning, and Administration.

The 16 roundtables were designed using a decentralized approach by the researchers in each thematic area and later validated by the entire scientific committee. Their design aimed intentionally at important updates on the area's main thematic issues. The debates featured contributions with a lively exchange of experiences and controversies and marked the arrival of new actors on Brazil's scientific scene.

There was a wide variety of themes: (1) State, social policies, and health; (2) Policy, administration, and healthcare networks in Brazil; (3) Work and education in health: scenarios and alternatives; (4) Democracy and social participation; (5) Vaccine and vaccination policy: challenges during the pandemic; (6) The leading role of social and human sciences in health for understanding and confronting epidemics and the COVID-19 pandemic; (7) Institutional crisis and judicialization of federative relations in Brazil: impasses and perspectives; (8) Building an agenda for the field of hospital policy, administration, and patient care in the unified health system; (9) Political economy of health financing in Brazil: alternatives to neofascism and ultra-neoliberalism; (10) Prospects for confronting the COVID-19 in Brazil; (11) International scenario and countries' response in confronting the COVID-19 pandemic; (12) Reflections on privatization, sus, and the health market; (13) Approaches and intervention devices in healthcare management and production; (14) Planning, evaluation, and management in the current conjuncture: what we have in our toolkit and what we need to invent; (15) Research, development, and innovation in health; e (16) The front for life: Brazil needs the SUS 4.

There was a wide diversity of participants in the roundtables, featuring both senior researchers and young researchers, black and indigenous leaders, and community and social movements, enriching the area with their unique places of speech and world readings.

Italian philosopher Franco Berardi gave a lecture on *The Enigma of the Kiss: Pandemic Distancing in the Psychological Evolution of the Human Genus*, provoking participants to reflect on contemporary networks of affect and the subjective marks that will be left by the long pandemic.

The pandemic and Brazil's dramatic situation in the international context were the backdrop and permeated all the roundtables and grand debates. The congress was held with humankind (and Brazil in particular) suffering the effects of attempts to eliminate what is left of the Welfare State and facing the urgent need to defend truly democratic perspectives.

The two grand debates raised instigating questions for the congress participants. In the first, Sonia Fleury and Renato Lessa reflected on the question, "Is there a future for democracy in Brazil?" In the second, Joice Berth, Christian Dunker, and Cida Bento expounded on the provocation, "Is it possible to dream of a sociability without infamy in post-pandemic Brazil?".

The area of policy, planning, and administration has always been part of the disciplinary tripod sustaining the Collective Health field. The 4th Brazilian Congress on Health Policy, Planning, and Administration showed the Brazilian people that we are still standing to defend the right to health, a right won by and consecrated in the 1988 *Constitution*.

The congress enabled us to conceive alternatives for the population's health in the context of the most serious health, environmental, political, and economic crisis in Brazil's history. There were proposals for confronting the government's negligence and disorganization in a time of immense suffering, grieving, and pain for the Brazilian people.

Approaching the area of health policy, planning, and administration as an area for research and knowledge production, the congress showed that we have built a field that induces practices and services and that has developed by interweaving research production in a reflexive process on the obstacles, current challenges, and feasible solutions for strengthening the Brazilian health system. Knowledge production in health policy, planning, and administration is primarily applied and engaged in the defense of health as a right.

The Hesio Cordeiro Award was established for 30 honorable mentions among the 326 coordinated communications, in the areas Challenges for the SUS, Alternatives for Implementation, and Proposals for Strategy Change in the Near Future, with 11, 9, and 10 honorable mentions, respectively.

The congress allowed reconnecting health with democracy, health with sustainable development, and health with policies to decrease exclusion, discrimination, and prejudice. During the event, it was possible to defend strategies to ensure the universal to health and to overcome predatory social relations.

The papers presented and the themes debated in the roundtables and pre-congress workshops identified political strategies and technical resources with the potential to impact the organization of government agendas and social movements (the congress proceedings are available at: https://www.youtube.com/watch?v=e2astT6xSqQ&list=PLWGsEtFn 0h_KU_eZq5LArSHF8z99V_gPv).

These initiatives stimulated new forms of decision-making, mobilization, and inter-sector linkage, aimed at building political unity to interrupt the country's prevailing exclusion and allow formulating projects for a democratic society with people's participation.

The congress succeeded in establishing a historical milestone for resistance and innovative formulation of proposals for intervening in different levels of political and technicaloperational action to strengthen the SUS.

As heirs to Oswaldo Cruz, the field of Collective Health in Brazil (which spearheaded the section on health in the *1988 Constitution*, consecrating "*health as the right of all and the duty of the State*") participated in the 4th Brazilian Congress on Health Policy, Planning, and Administration to proclaim that the field is standing proud and ready to rebuild ⁵. The closing session of the Congress approved the *Letter for Hope in the Future*.

As the poet Vinicius de Moraes said, in the closing lines of the Letter for Hope in the Future, "sadness always includes the hope that one day it will no longer be sad".

Contributors

The two authors participated equally in the text production.

Additional informations

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