

## Indignation and hope

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The political crisis in Brazil and its economic and social impacts on the field of health and the Brazilian Unified National Health System (SUS) permeated the debates at the 3<sup>rd</sup> Brazilian Congress on Health Policy, Planning, and Management held by Brazilian Public Health Association (ABRASCO) in Natal, Rio Grande do Norte State, in early May 2017. Defense of the SUS and the right to health echoed throughout the Congress, given the budget cuts in social programs and threats to the system's sustainability resulting from the ultraliberal reforms under way in the country.

The debates on social and health policies featured criticism of the dismantling of the SUS and the constraints on social inclusion policies perpetrated by the current Administration, which has cut funding for programs and projects through a Constitutional Amendment Bill (PEC) aimed at freezing public spending on social programs, while reaffirming the Administration's insistence on policies to privatize healthcare (e.g., with so-called "low-income health plans"). The theme of development and alternatives for overcoming the country's political and social crisis highlighted the debates that unveiled the reasons for the crisis and the agents and interests behind the current Administration's liberalizing reform program with the support of Congress and the hegemonic media that spearheaded the institutional break interrupting the term of the President elected in 2014.

Multiple voices at the congress called for agreements on new arrangements involving the various collective stakeholders to update the debate on strategies for the Brazilian Health Reform and organize the struggle and mobilization in the resistance against the attempts to dismantle the SUS and the country's incipient Social Protection System, a legacy of the 1988 *Constitution*. This process materialized in numerous thematic meetings, council meetings, and the meeting of the Health Reform forum, which expanded its membership and launched proposals to rebuild its political and organizational agenda.

More than 2,000 people participated in the congress, representing every state of Brazil and demonstrating the keen interest by stakeholders in public health in the political debate and discussion on knowledge production in health policy, planning, and management.

The variety of themes fostered a productive dialogue on crucial issues for the survival and consolidation of the SUS, including judicialization (recourse to legal action to obtain

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medicines and medical devices), regionalization, scientific and technological innovation, financing, social participation, and management models.

The diversity of voices among the participants appeared in the scientific papers and reports on experiences in health services, management, and social participation, revealing the potential for action in the daily construction of the SUS and the production of new knowledge and practices. More than 1,900 papers were presented in panel discussions and the debates in poster sessions, revealing the power for interaction and dialogue in knowledge-sharing.

Still, in the midst of the indignation and will to resist, participants voiced doubts and questions over the best paths of action for confronting the current crisis. The debates showed that Brazil's current challenges add to the dilemmas that have plagued the SUS since it was first created, for example, in the Health Reform's incomplete agenda, budget constraints, encroaching privatization, insufficient regionalization, incipient changes in healthcare practices, and bureaucratization of management models and processes, combining to limit the quality of health surveillance and healthcare and jeopardizing the legitimacy of the SUS.

This critical awareness of the limits to the historical implementation of the SUS in no way underrates the important strides made in the nearly 30 years since the system was created, but it does highlight the need for an in-depth analysis of the mistakes made along the way and for progress in knowledge production in the field, to increase the power for analytical capacity and proposals for the necessary innovations in policy design, planning, and new ways of organizing and managing the health system, networks, and services.

This is a challenge for academic institutions, graduate studies programs in public health, administrators, and various stakeholder organizations.

Aware of the challenge, the participants produced several letters and manifestos addressing the need to reclaim democracy in Brazil, intensify the struggle for the right to health together with organizations and social movements in the defense of the social rights enshrined in the 1988 *Constitution*, and resist the exclusionary reforms proposed by the current illegitimate Administration.

These demands were expressed in the *Natal Declaration* (<https://www.abrasco.org.br/site/eventos/congresso-brasileiro-de-politica-planejamento-e-gestao-em-saude/carta-de-natal-declaracao-final-3o-congresso-de-politica/28568/>, accessed on 30/May/2017) approved unanimously in the final plenary session, signaling the participants' hope and disposition to struggle and mobilize collectively to reclaim democracy in the country and recreate the conditions for building the SUS and consolidating the right to health and the social rights threatened by the detainers of predatory financial capital and their market ideologues in the media oligopolies.

Brazil now faces a turning point in the definition of its democratic future. The prospects for consolidation of the Health Reform depend on proactive mobilization and strategic proposals for the medium and long term.

The struggle to safeguard and guarantee the constitutional principles of the SUS is still on the order of the day, together with the urgent need to integrate social movements in favor of public policies under the aegis of democracy. It is indispensable to combine strategic movements of resistance and defense of constitutional principles and social rights and the search for democratic reforms in political society and in the system of interest representation.

Based on political action by and for the public interest in a society still marked by profound social inequalities, protagonists in the collective health field are once again challenged to rebuild their communities of praxis, pursuing motivating and mobilizing self-criticism from a generational historical perspective. The time has come for us to meet again in the forums and city squares to reclaim and reaffirm the social legitimacy of public policies that can guarantee inalienable social and human rights, establishing dignity and democratic participation and ensuring the Brazilian people's future.