It is with immense satisfaction that we present the Special Public Health Supplement to the journal Interface: Comunicação, Saúde, Educação.

We believe that by welcoming the proposal presented by the Strategic and Participatory Management Secretariat of the Ministry of Health, to enable this production, the Editorial Board of *Interface* not only acknowledges its recognition of Public Health Education (Educação Popular em Saúde; EPS) but also shows its commitment toward the democratization of the Unified Health System (SUS).

When recognizing and legitimizing this field, it is important to acknowledge that health transverses thinking, feeling, and acting. These dimensions are reinforced when we assume an integrating stance while knowledge production. The connection between different fields of knowledge (popular, technical, or academic) is ethically imperative for participative management, training, social control, and modern healthcare.

The intense impact that the current reality has on this subject is affirmed by this publication in at least two aspects: First, the fact that we are witnessing the institutionalization of the National Popular Health Education Policy (Política Nacional de Educação Popular em Saúde, PNEPS-SUS), which was decreed in November 2013. After a significant period since its inclusion in the Ministry of Health's political and administrative framework, by gathering different fields of knowledge and practices built through dialog with managers, workers, and teachers and social and popular movements, EPS has become established as a policy. Second, the fact that the Brazilian society, encouraged by the proposed National Policy of Social Participation (Política Nacional de Participação Social) on the agenda of the National Congress, is actively involved in the debate on the possibility of expanding participative democracy in the management of public policies, guaranteeing the rights of the citizens.

By presenting the abundance of theoretical reflections and systematization of Public Health Education experiences and practices, this Supplement will substantially contribute to a dialectic, problem-solving, and loving construction (which is inherently Freirean in perspective) of the "how to" and the paths we must follow for effective implementation of PNEPS-SUS in multiple healthcare facilities.

Happy reading to all; may this seed germinate in all the daily practices developed in the SUS.

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