The 2013 Brazilian National Health Survey: a snapshot of the health of a nation

This issue of *Ciência & Saúde Coletiva* details results from the 2013 Pesquisa Nacional de Saúde (PNS 2013). The PNS, a collaborative effort between the Ministry of Health (MoH) and IBGE, provides a vivid snapshot of the health situation in Brazil today.

The PNS provides national and state-level estimates of self-reported health and illness, risk factors, and use and satisfaction with health services. The first article by Malta et al. examines reported coverage of the SUS's flagship program, the Family Health Strategy (FHS). They find that self-reported FHS coverage is consistent with MoH estimates and show that household visits by a community health worker occurred most frequently among those in lower socioeconomic conditions, demonstrating the FHS's potential for improving equity in healthcare access.

The PNS also captures the population's experiences and perceptions of a range of national policies and programs. The article by Szwarcwald et al. discusses people's assessment of the healthcare services they received over the past year. They find high levels of access and utilization (nearly 75% consulted a doctor in the past year), and positive assessments of healthcare, with the exception of complaints about waiting time among those using the national health system, and marked regional differences in users' experiences.

In Brazil's decentralized health system, the existence of regular national assessments helps to further the work of municipalities and states and stimulate opportunities for adoption of best practices. The article by Viacava and Bellido documents trends in healthcare utilization from 1998 to 2013. They find an increasing trend of better access and more frequent use of health services, but note the persistence of regional disparities, especially in the North and Northeastern regions of the country.

Due to its large sample size, the PNS 2013 also allows for monitoring experiences across different subgroups, which is essential in measuring equity - a fundamental goal of the SUS. The article by Boccolini et al. discusses people's perception of discrimination when using health services. Here, the assessment is less favorable with as many as 10% of users reporting having felt discriminated against when seeking healthcare. Reports of discrimination were more common for women, people who had not completed primary school, non-white individuals, and those without a private health plan.

The PNS also allows a close examination of individuals who have chronic conditions or physical or mental disabilities. The article by Silva et al. discusses lifestyle-related behaviors among people diagnosed with cancer. The authors find that some practices such as quitting smoking and adequate consumption of fruits and vegetables were higher among cancer survivors. But, cancer survivors also reported higher use of alcohol and little difference in other healthy activities, suggesting the need for programs specifically tailored to keep this population healthy.

Another function of the PNS is to assess progress on national public health initiatives including the national plan to confront non-communicable diseases (NCDs). Two articles address this function. The article by Nico et al. demonstrates important disparities in oral health. They find that a number of overlapping factors such as male gender, older age, non-white race/skin color, lower educational attainment, and geography (rural and northeast region) had the lowest indicators of good oral health, suggesting the need for further efforts to extend oral health services to these vulnerable populations. The article by Malta et al. presents self-reported data on motor vehicle crashes. The results are mixed: while front seat safety belt and motorcycle helmet use reached nearly 80%, (albeit with lower rates in the North and Northeast) about 3% were involved in crashes in the past month that required about half to obtain medical care and left nearly a sixth with health problems.

Despite the limitations inherent in any cross-sectional study relying primarily on self-report, the articles in this edition demonstrate a broad panorama of progress made and highlight the significant work still ahead for a national health system permanently under construction.

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