Healthcare is development: this is the challenge of the XIII National Health Conference

Scheduled for November 14, 15 and 16, 2007, Brazil’s XIII National Health Conference pays tribute to the historic VIII Conference held in 1986, which was a political and institutional milestone of the utmost importance for the health of the Brazilian population. It affirmed the main principles guiding the Public Health Reform Project, establishing the construction parameters of Brazil’s National Health System (SUS) while underpinning the consolidation of democracy and citizenship through healthcare.

Summarizing the theses presented by ABRASCO at this Conference, Healthcare is Development reflects the idea that this is an asset of society, which should thus define the paths for its development. However, while not forgetting the main players - all Brazilian - we must consider and reconsider healthcare as an institutional project for ensuring the right to life, drawing together all the many agents engaged in this sector: administrators, service providers, social movements, thinkers and researchers.

But this institutional project cannot and should not be bound by the administrative constraints that rule this sector, as this may undermine the status of heath and healthcare as the most precious assets of Brazilian society. In order to tailor the institutional project to the concerns of the people, red tape must be cut away, breaking free from the conservative, disciplinary limits that shackle us and paving the way to the intersectoral approach, heralded by the VIII Conference but still barely implemented.

Closely attuned to this spirit of appreciation and openness that has been firming up ever since the VIII Conference, and eager to review the progress made so far in terms of what should be updated, queried and altered, the ABRASCO Policy, Planning and Management Commission presents - on behalf of this Association - a set of papers in this supplement to the Ciência & Saúde Coletiva journal.

We present eight papers written by researchers in the Collective Health field who are also long-standing militants for Brazil’s National Health System (SUS). The first of them examines Brazil’s political and economic situation and the relationships between healthcare and development. The second describes and analyzes the health situation of the Brazilian people, striving to highlight the trends steering actions in this sector. The third addresses its institutionality in the course of its implementation and its current challenges. The fourth explores affinities among the proposals presented to the Ministry of Health, the Healthcare Councils, the National Council of State Health Bureaus (CONASS) and the National Council of Municipal Health Bureaus (CONASEMS). The fifth assesses alternative management models for the healthcare network. The sixth focuses on financing this System, including alternatives for Constitutional Amendment EC-29, which defines healthcare activities for budget purposes, together with sources and percentages assigned to the System. The seventh focuses on the importance of science and technology for the consolidation of Brazil’s Public Health Reform Project. Finally, the eighth concludes the set of theses, through a hermeneutical reflection on the Brazil’s National Health System and the various traditions of healthcare organization.

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Maria Cecília de Souza Minayo
Scientific editor Ciência & Saúde Coletiva