Newspapers Folha de São Paulo e Correio Braziliense: what they say about the program more doctors?

Indyara Morais1, Dábyla Alkmin2, Jéssica Lopes3, Marina Santos4, Mariane Leonel3, Rodrigo Santos3, Weverton Rosa3, Ana Mendonça5, Maria Sousa6

ABSTRACT
Analyzes publications related More Medical Program from July to September of 2013 and its impact on mail Braziliense and Folha de São Paulo. This is a descriptive study using a qualitative-quantitative methodology. The analyzed and related data represent what the program takes in print. 363 publications were found, 262 in Folha de São Paulo and 101 in Correio. The word “Doctor” appeared in more titles, and Folha de São Paulo were 110 negative titles; to Correio neutral character was in 50 publications. In the character of news, 178 of these are pessimistic. The “neutral” and 101 representing “optimistic” 83. Was found that the media is critical to the impact of the program, but the truth is not apparent, but the opinion of journalists who wrote the stories related to the theme.

RESUMO
Analisa as publicações relacionadas ao Programa Mais Médicos de julho a setembro de 2013 e sua repercussão no Correio Braziliense e Folha de São Paulo. Trata-se de um estudo descritivo que utilizou de metodologia qualitativa-quantitativa. Os dados analisados e relacionados representam o que o Programa assume na mídia impressa. Foram encontradas 363 publicações, sendo 262 na Folha de São Paulo e 101 no Correio Braziliense. A palavra “Médicos” mais apareceu nos títulos, e na Folha de São Paulo foram 110 dos títulos negativos; no Correio Braziliense o caráter neutro esteve em 50 das publicações. No caráter da notícia, 178 destas são pessimistas. As “neutras” representaram 101 e as “optimistas” 83. Verificou-se que a mídia é fundamental para a repercussão do Programa, mas não transparece a verdade, mas a opinião de jornalistas que escreveram as notícias relacionadas ao tema.

RESUMEN
Analiza publicaciones relacionadas al Programa Más Médico de julio a septiembre de 2013 y su impacto en el Correo Brasiliense y Folha de São Paulo. Se trata de un estudio descriptivo con metodología cualitativa-cuantitativa. Los datos analizados y relacionados representan lo que el programa toma en forma impresa. Se encontraron 363 publicaciones, 262 en Folha de São Paulo y 101 en Correo. La palabra “doctor” apareció en más títulos, y Folha de São Paulo, 110 títulos negativos; a Correo carácter neutro estaba en 50 publicaciones. En el carácter de las noticias, 178 de ellos son pesimistas. El “neutral” y 101 que representa “optimista” 83. Se encontró que los medios de comunicación es fundamental para el impacto del programa, pero la verdad no es evidente, pero la opinión de los periodistas que escribieron las historias relacionadas con el tema.

DESCRIPTORS
Health communication
Public health
Health management
Social media

DESCRITORES
Comunicação em saúde
Saúde coletiva
Gestão em saúde
Midias sociais

DESCRIPTORES
Comunicación para la salud
Salud pública
Gestión de la salud
Medios de comunicación social

1 Student of Masters in Public Health from the University of Brasilia, Brasilia, Brazil. 2 Degree in Public Health, University of Brasilia, Junior Researcher at the Center for Studies in Public Health, Brasilia, Brazil. 3 Graduate Student in Public Health from the University of Brasilia, Intern in Center for Studies in Public Health, Brasilia, Brazil. 4 Student Undergraduate Nursing, University of Brasilia, Intern at the Center for Educational Technologies Interactive Health, Brasilia, Brazil. 5 PhD in Information Sciences, Professor of Public Health at the University of Brasilia, Brasilia, Brazil. 6 PhD in Health Sciences, Professor of Public Health at the University of Brasilia, Brasilia, Brazil.
INTRODUCTION

Over the 25 years of implementation of the Unified Health System (SUS), the country has been putting together a series of initiatives, including the Programme for the Enhancement of Primary Care (PROVAB), Pro-Pet-Health and Health Incentive Curricular Changes in Courses Medicine (Promed); as strategies for overcoming the problems relating to the formation, distribution, provision and fixing of health professionals, especially doctors.

Most Doctors Program resumes, especially in the media, these historical problems. Rekindles the debate on whether to change the interior of medical schools, the training of professionals capable of working in SUS, with priority for primary health care, within its central theme: the Family Health.

Rekindled, especially the need to reverse the current model of medical education in the country, whose characteristics are sustained by: (a) decoupling the teaching of biomedical sciences (anatomy, physiology, biochemistry, pharmacology, bacteriology) in the early years of the course and clinical disciplines; (b) little emphasis on the aspects of prevention and health promotion and focus on aspects of individual medical attention; (c) focus on the disease without having viewed the subject in its uniqueness; (d) valuing learning in the hospital environment, ignoring the reality and the social space where families and communities are embedded; (e) early specialization; (f) Huge gap between institutions of higher education, health services and communities; (g) disregard of the work environment as a pedagogical principle.

These characteristics present in the course of medical training, but common to all courses in health, have had as a consequence the formation of professional profile quite inappropriate to the prospect of building new model of health care. This inadequacy is perceived not only in the technical aspect, but mainly in little social accountability and ethical commitment to SUS users.

Thus, it is "virtually consensual" in Brazil and the world, the incompatibility of coexistence between this model of medical practice and the universal and equitable access of the population to health services. Furthermore, to overcome this crisis in the training of health professions, the right one is a Reform School. Reform that modify the paradigmatic axis of medical practice and stimulate the formation of professionals with a holistic view of individuals, families and communities. Sousa and Mendonça(1).

In this sense, this article is organized into: (I) the emergence of the More Doctors Program in Brazil; (II) the influence of the media in health policy; (III) the analysis of the main results and discussion of the reports in the Folha de São Paulo and Correio Braziliense.

The Emergence of More Doctors Program

According to the WHO(2) Brazil has 359 691 active physicians and presents a ratio of 1.8 doctors per thousand inhabitants, as primary data obtained in the Federal Council of Medicine (CFM) and the estimated population of the Brazilian Institute of Geography and Statistics (IBGE)(3). The proportion of medical / 1,000 population observed in Brazil is lower than in other Latin American countries with similar socioeconomic profile or countries that have universal health systems, namely: Canada 2.0; UK 2.7; Argentina 3.2; Uruguay 3.7; Portugal 3.9; Cuba and Spain 4.0 6.7.

There is no parameter to establish an ideal ratio of per capita medical internationally recognized and validated. For this, we used as reference the ratio of 2.7 doctors per 1,000 inhabitants, which is found in the UK, a country which, after Brazil, has the largest public health system of universal character-driven primary care. In this scenario, 168 424 more doctors for Brazil to achieve the same ratio of doctors per capita would be required. Maintaining the current growth rate in the number of doctors in the country, the achievement of this goal will only be viable in 2035.

The distribution of physicians in the country regions shows great inequality, with much of the states with a number of doctors below the national average. Table 1 shows this distribution. IBGE, CFM(3).

Table 1 - The Physician in population, by brazilian states.

<table>
<thead>
<tr>
<th>UF</th>
<th>Population in 2012</th>
<th>Total Physicians</th>
<th>Doctor per 1,000 hab.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acre</td>
<td>721.006</td>
<td>679</td>
<td>0,94</td>
</tr>
<tr>
<td>Alagoas</td>
<td>3.233.234</td>
<td>3.632</td>
<td>1,12</td>
</tr>
<tr>
<td>Amapá</td>
<td>662.927</td>
<td>505</td>
<td>0,76</td>
</tr>
<tr>
<td>Amazonas</td>
<td>3.534.574</td>
<td>3.744</td>
<td>1,06</td>
</tr>
<tr>
<td>Bahia</td>
<td>15.001.484</td>
<td>16.311</td>
<td>1,09</td>
</tr>
<tr>
<td>Ceará</td>
<td>8.810.603</td>
<td>9.277</td>
<td>1,05</td>
</tr>
<tr>
<td>Distrito Federal</td>
<td>2.741.213</td>
<td>9.494</td>
<td>3,46</td>
</tr>
<tr>
<td>Espírito Santo</td>
<td>3.577.833</td>
<td>7.040</td>
<td>1,97</td>
</tr>
<tr>
<td>Goiás</td>
<td>6.145.928</td>
<td>8.917</td>
<td>1,45</td>
</tr>
<tr>
<td>Maranhão</td>
<td>6.533.540 million</td>
<td>3.767</td>
<td>0,58</td>
</tr>
<tr>
<td>Mato Grosso</td>
<td>3.120.442</td>
<td>3.441</td>
<td>1,10</td>
</tr>
<tr>
<td>Mato Grosso do Sul</td>
<td>2.426.518</td>
<td>3.733</td>
<td>1,54</td>
</tr>
<tr>
<td>Minas Gerais</td>
<td>20.529.623</td>
<td>37.149</td>
<td>1,81</td>
</tr>
<tr>
<td>Pará</td>
<td>7.726.888</td>
<td>5.938</td>
<td>0,77</td>
</tr>
<tr>
<td>Paraíba</td>
<td>3.843.916</td>
<td>4.488</td>
<td>1,17</td>
</tr>
<tr>
<td>Paraná</td>
<td>10.945.791</td>
<td>18.406</td>
<td>1,68</td>
</tr>
<tr>
<td>Pernambuco</td>
<td>9.015.728</td>
<td>12.547</td>
<td>1,39</td>
</tr>
<tr>
<td>Piauí</td>
<td>3.214.556</td>
<td>4.488</td>
<td>1,39</td>
</tr>
<tr>
<td>Rio de Janeiro</td>
<td>16.383.401</td>
<td>56.391</td>
<td>3,44</td>
</tr>
<tr>
<td>Rio Grande do Norte</td>
<td>3.221.581</td>
<td>3.977</td>
<td>1,23</td>
</tr>
<tr>
<td>Rio Grande do Sul</td>
<td>11.073.282</td>
<td>24.741</td>
<td>2,23</td>
</tr>
</tbody>
</table>

Continued...
According to CREMESP\(^4\) the states that have a number of physicians above the national average, the cases of the Federal District, Rio de Janeiro and São Paulo, exhibit, internally, considerable differences in their regions and municipalities with respect to absence and fixing this professional. In particular is the state of São Paulo, in only five of its regions, presents a number greater than 1.8 doctors per thousand inhabitants.

Many are the manifestations regarding the diagnosis of the need for doctors in the National Health System, in particular in primary health care network, which since 1994 has been restructured through the Family Health Strategy. And yet, recognizing its achievements over two decades, there are several regions, states and municipalities with empty territories in relation to health care.

It is historically recognized the concentration of these professionals in large urban centers and in more developed regions of the country, which results in other regions to provide low capacity and fix health professionals in primary care, in particular physicians, jeopardizing the expansion of access, quality of basic health services.

According to the Sousa\(^5\) there are several studies that indicate this question. Among them we can mention by the Institute of Applied Economic Research (IPEA), in 2011, with 2,773 respondents, which revealed that 58.1% of the population pointed to the lack of doctors as the main problem of the SUS. Before that it is necessary to recall three others: The Profile Doctors and Nurses of the PSF, coordinated by the Center for Research in Human Resources for Health (nurhes), School of Public Health (EN-SP) Fiocruz; research rating Polos Training at the Center for Public Policy Studies at UNICAMP (NEPP); Research and Monitoring of Family Health Teams, this held by the Coordination of Evaluation and Monitoring Department of Primary Care.

In all research, some aspects are converging: (i) the high rotation of personnel between the municipalities; (ii) the lack of conditions for work (iii) the precariousness of employment contract with temporary contracts; (iv) the need to revise the training without adequate profile for the responsibility assigned to them, especially in the actions of a preventive nature and health promotion; and (v) the failure of the workload of 40 hours of work, among others.

The results of this research should have been used to support negotiations and definitions of strategic actions with regard to education, training and continuing education for staff involved in public health in general and in particular the Primary Care / Family Health Strategy.

Other movements emerged on the national scene to the problems faced by the Brazilian population due to the lack of doctors in the public health system, such as the National Front of Mayors, which in March 2013, launched the “Where’s the doctor?” And mainly by tensioning occurred in June across the country by street movements. Were massive movements that differ radically from the “social movements” under the control of the State, political parties including the Workers (PT) and social organizations like the MST, for example. The fact is that in their claims of general order, the health agenda was set as a central theme among the agendas of education, transportation and public safety.

This made Ministries of Health, Education and Planning, Budget and Management send the presidency an explanatory memorandum to the draft Provisional Measure that established the More Doctors Program, created under Law 12,871 / 2013\(^6\)\(^7\) for the purpose of: (i) decrease the shortage of doctors in priority regions for the NHS in order to reduce regional inequalities in health; (II) to strengthen the provision of services in primary health care in the country; (III) improve medical education in the country and provide more experience in the field of medical practice during the training process; (IV) to expand the inclusion of physicians in training at the clinics of the SUS, developing their knowledge about the reality of the health of the population; (V) strengthen the policy of continuing education with the teaching-service integration, through the work of higher education institutions in the academic supervision of activities for the patients; (VI) promote the exchange of knowledge and experiences between professionals of Brazilian and foreign trained doctors in health institutions; (VII) improve doctors in public health policy of the country and the organization and functioning of the SUS; and (VIII) The carrying out applied research in SUS.

The items that made the official discourse to justify the creation of the More Doctors Program, by the Ministries of Health, Education and Planning, Budget and Management were: First - insufficient number of places in undergraduate courses in Medicine. Although a larger absolute number of medical schools in some countries (are 220 medicine schools), when analyzing the proportion of vacancies for entrance to ten thousand (10,000) inhabitants, the country has significantly lower index\(^6\). Figures 1 and 2 illustrate this argument.

<table>
<thead>
<tr>
<th>UF</th>
<th>População 2012</th>
<th>Total de Médicos</th>
<th>Médico por 1.000 hab.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rondônia</td>
<td>1.531.920 million</td>
<td>1.562</td>
<td>1.02</td>
</tr>
<tr>
<td>Roraima</td>
<td>445.043</td>
<td>540</td>
<td>1.21</td>
</tr>
<tr>
<td>Santa Catarina</td>
<td>6.297.460 million</td>
<td>10.656</td>
<td>1.69</td>
</tr>
<tr>
<td>São Paulo</td>
<td>42.390.043</td>
<td>105.658</td>
<td>2.49</td>
</tr>
<tr>
<td>Sergipe</td>
<td>2.074.528</td>
<td>2.701</td>
<td>1.30</td>
</tr>
<tr>
<td>Tocantins</td>
<td>1.323.231</td>
<td>1.426</td>
<td>1.08</td>
</tr>
<tr>
<td>Total</td>
<td>196.526.293</td>
<td>359.691</td>
<td>1.83</td>
</tr>
</tbody>
</table>

Source: IBGE Population 2012, primary data CFM 2012 Study ‘Medical Demography’, CFM\(^3\)

\(^3\) Newpapers Folha de São Paulo e Correio Braziliense: what they say about the program more doctors?

Rev Esc Enferm USP
2014; 48(Esp2):107-115
www.ee.usp.br/reeusp/
Second - while Brazil has the rate of 0.8 spaces per 10,000 inhabitants, other countries have higher rates, namely: Australia 1.4; UK 1.5; Portugal and Argentina 1.6 – 3.1. Furthermore, there are states in which this index is even lower, such as Maranhão and Bahia 0.39; Third - the shortage of doctors in different regions is manifested in analyzes conducted on the labor market, as in the study “Demography of Medical Work,” the Center for Education in Public Health, Federal University of Minas Gerais (UFMG), based on data Annual Report of Social Information (RAIS)\(^3\).

Depending on the study, between the years 2003 and 2011 to 93 156 graduates of medical courses 146,857 formal jobs were created. It is worth noting that these data are not included doctors who choose to join the residency, cooperative or independent physicians. Thus, we conclude that a significant portion of newly graduated doctors have entered the labor market with the possibility of exercising a more formal employment.

Moreover, the Brazilian population perceives and expresses discomfort with this shortage of doctors, which impacts on access to SUS. In a study of the Indicators of Social Perception System, done by IPEA, besides indicating that the lack of doctors is the main problem of SUS in the same study, the most frequent response for suggested improvements to the health system was to increase the number of physicians.

Given these and other speeches, the National Congress approved Law 12,871, of October 2013, establishing the More Doctors program\(^7\), with the aim of developing human resources in the medical area for the SUS and accelerate investments in infrastructure in the area. The same consists of three axes: (1) creation of new jobs for undergraduate medicine as well as change in the logic of opening of courses to meet the priority areas of the SUS; (2) enhance medical education, including her experience of forming the SUS; and (3) provide medical assistance on the outskirts of major cities and towns of the interior, prioritizing municipalities in the metropolitan area, capital, municipalities that are part of the so called G100 (populated municipalities with low capita and high socioeconomic vulnerability per recipe) and municipalities have 20% or more of its population living in extreme poverty.

Since the announcement of More Physicians Program, there were several debates on different social subjects and ideological hues, though the most fierce confrontation took place between the representative of the government and its support base in Congress and the medical corporations, especially the Federal Council of Medicine.

The media made of that debate expanding the favorable and unfavorable arguments surrounding the program. What caused a series of public opinion research including the CNI IBOPE, conducted in July 2013 revealed that the same population believes that the responsibility of Health is divided between the federal, state and municipal governments (Figure 3).
In August 2013, a survey was also conducted by Datafolha, which showed that 54% of those interviewed approved the “Program More Medical”, while the Northeast had the highest percentage of approval. The program also provides for the inclusion of medical professionals trained abroad, if not the filling of vacancies by Brazilian doctors occur.

Influence of Media in Health Policies

Lerner e Schramm (9) brings speaks to that communication contributes to the changes occurring in the economic and social development. We can infer that it establishes the environment in which development can take place. Soon after deploy and expand the idea of change in a country discovers he can use communication to increase the expectations of his people, so that he may want a stronger economy and a modernized society, plus a health situation influenced by the determinants social that will bring welfare and mental

According to Schiavo10, health Communication is a multifaceted and multidisciplinary approach to reach different audiences and share health-related information in order to influence, engage and provide support to individuals, communities, health professionals, special, political groups and the public to defend, enter adopt or sustain a behavior, practice or policy that ultimately improve health outcomes.

Within this context, the vehicles of mass communication, such as the printed newspaper These are important means of disseminating health information for significant portions of the population11. Such vehicles brought concepts, facts and opinions on a new project of the Ministry of Health for allocating doctors to work in primary care.

The “More Doctors Program” was regulated by Law No. 12,871, dated 22 October 2013, with some changes from the original text of the Provisional launched in July 2013. These changes gave the corporate disputes widely publicized by the media.

The program’s goal is to accelerate investment in infrastructure in hospitals and health facilities and increase the number of doctors in underserved regions of the country, such as the municipalities within regions and suburbs of large cities, with the vacancy rate for Brazilians and foreigners to act in these localities11. The municipality should sign up for the doctor to provide all the resources for housing and food and the Federal Government would provide individual financial aid.

The places offered by the Ministry of Health in Primary Care for action not met by Brazilian doctors were available to foreign duly enrolled in the program said. According to the website of the Ministry of Health, the edicts governing the program were open to foreign doctors who acted in countries with percentages of workers per thousand higher than Brazil’s population, this being in our country equal to 1.8. The focus of the federal government were countries like Spain, Portugal and Cuba, due to skills training in primary care and similarity of language.

The program resonated More Doctors in medical organizations, government, the media and society, providing subsidy for newspapers published news about the phases of the program, corporate disputes and negotiations related to broad issues such as education, politics and the economy. But these stories have not always proved positive, reporting the contrast between the position of the government and of federal and state medical boards, and discuss problems faced for the “practical implementation” of the program in the country. The newspapers also carried the opinion of readers in specific fields.

From the illustrated context, this paper proposes the analysis of news related to More Doctors Program in the newspaper with the largest circulation in Brazil - Folha de São Paulo - and in the newspaper with the largest circulation in Capital Federal - Correio Brasiliense. The analysis period was from July 1 until September 30, 2013, this time frame was given a week before the official announcement at the opening of the 29th National Congress of Municipal Health on July 8, to the entrance of physicians after the selection and training in Primary Care.

A survey of the character of the news published on the topic was conducted, as well as its social implication for readers. Expected to analyze the impact that the program and its associated subjects reached the media during the period of data collection.

METHODOLOGY

The research is constituted through a descriptive and qualitative and quantitative methods for retrospective analysis of regular newspaper Folha de São Paulo and Correio Brasiliense were used in the period from July 1 to September 30, 2013, year in which the program More Doctors by Ministry of Health of Brazil. The material analyzed should contain at least one of the following descriptors in context: More Doctors, Foreign Doctors and Medical.

The variables were the newspaper name, month, day, year, with the notebook boom, page, publication type (charge / image, chronic, opinion and reportage), category (management, primary care, family health, vocational training, corporatism, funding, and policy issues associated), and the news title character (optimistic, pessimistic and neutral), cover story and / or highlight (yes and no), journalist, news value (yes or no), and finally, news headline.

The news of newspapers had its contents analyzed using the methodology of Bardin12, for whom the content analysis is to originally represent the research instrument used to determine the presence of certain words or concepts within a text or set texts and, from the data analysis
(qualitative and / or quantitative) and the relationships between them, in order to make inferences about the messages contained in the text.

According to Bardin(12), categorization is a sort operation of the constituent elements of a set by differentiation and then by regrouping according to gender (analogy). Thus categorical content analysis is achieved by dismemberment of text units in categories operations, according analog clusters, and is characterized by a structuralist process that classifies the elements according to research on what each has in common. I.e., the categories are categories or classes that meet a group of elements (log units) under a generic title, because of the common characters presented by these elements.

After analysis, the intersection of the data with the aid of N VIVO10 program was conducted. This is a software that supports qualitative and mixed methods. It also allows to gather, organize and analyze content of interviews, group discussions, surveys, audio, social media and web pages(13).

An analysis of each news was generated by following descriptors defined as a parameter. We investigated all subjects who fit the profile using the same previous descriptors; news content on the More Doctors Program was viewed that program and the main ideas were recorded and analyzed, described and related to each other so that they could devise a representation that the program has taken in print.

RESULTS AND DISCUSSION

At the end we obtained a total of 363 stories on the theme of the More Doctors program, with 262 (72.17%) in the Folha de São Paulo and 101 (27.82%) in Correio. Were 92 days of research in the months from July to September 2013, with only 10 days without related theme in the Folha de São Paulo and 30 days in Correio news.

July was the month in which registered more news about the program, with a total of 135 (37.19%) relationships. In the same month the Correio Braziliense had 31 News and the Folha de São Paulo 104 related news. The distribution by newspaper within their months-configured as follows: news at Correio Braziliense with 38 in August and 32 in September and the Folha de São Paulo with 76 and 82 stories respectively.

Was attributed to the high amount of news in the Folha de São Paulo in July by the establishment of Provisional Measure No. 621 this month, which led to the opening of discussions between physicians and controversy over the reasons beyond those exposed by the Ministry of health as justification for implementation of the Program.

The first argument of the Ministry was his duty to fulfill the orders that the Federal Constitution of 1988 in its article 200, section III, when he says that it is the responsibility of the Health System, the arrangement of the development of human resources. And to achieve this assignment is necessary to treat the relationship between health and education as a strategic issue. After all the quality of social assistance services available to society depends on the structuring of work, training and recognition of professionals working in the health sector.

Argument yet that this is a recurring theme in the National Health Conferences (CNS). Since the 9th CNS, held in 1992, until the 14th CNS, held in 2012 that spells out the essential need for formulation and implementation of a National Human Resource Policy. An effective policy can incorporate actions aimed at education, training and continuing education of professionals.

The pressures from mayors and social movements regarding the need for more medical composed argumentative discourse in defense of ministerial authorities Program.

Debate in the training of health workers, extrapolates the national scene. This is also a concern of international nature. It is worth mentioning that in November 2013, coordinated by the World Health Organization (WHO), in partnership with the Pan American Health Organization (PAHO) and the Ministry of Health held the Third Global Forum on Human Resources Health in Brazil, to discuss the global agenda in health human resources. The conference culminated in the Declaration of Recife, political statement of commitment from member countries, which include items such as: sustainable financing plan; process integration training of health professionals supported by new technologies of information and communication; special focus on primary care; transparent and accountable throughout the process of expanding the workforce in health, also considering the development of career plans governance; proper distribution and retention of health professionals in disadvantaged areas and the development of research and innovative strategies.

The aforementioned government initiatives, in theory, were presented and discussed at the National Board of Trade of the SUS as all strategies to face problems related to the formation, distribution, provision and retention of health professionals and career.

Type of Publication

Regarding the type of publication as many news category was “reporting” with 217 (60%) news, following by “opinion” 130 (36%), “charge / image” with 10 (3%) and “chronic “to six (1%). And the Figure 4 show the tree of the most mentioned words in news headlines.
the formation of Cuban medical professionals, as well as a wave of prejudice by Brazilian doctors who questioned organizations and the federal government. In this sense, “disagreements” political order among Brazilian medical number of physicians for the program, which generated conveyed that Cuba was the country that provided higher Mendoça A, Sousa M

Figure 4 reflects the most mentioned words in the headline news from Folha de São Paulo and Correio. The words represent larger ones that appeared most frequently in this way may be noted that the term most often cited was “Doctor” because of the theme and choice of descriptors for the news. The titles were more related to problems of corporate conflicts between Brazilian and foreign doctors. We notice that the word “against” assists in finding that most publications is negative slant.

The word “defends” that appears in the middle of the word “medical” in larger size, leads us to the idea of “Doctor defends doctors”, which took place between Brazilian doctors, but not among Brazilians and foreigners.

What the media is revealed that the medical corporation at the time the debate has broadened its look inside yourself. What securely “locked” and / or limited dialogue around the reserve of the corporate form market. For these and other reasons the issues relating to education and health work following government to government, from right to left center with proposals, although with merit, fragile at the base of the problem. Or follow having “little or nothing” of the federal pact. Where a real participation of Higher Education Institutions (HEIs) and other federal, state and local governments occurs. With a passivity of Congress, as well as the representations of corporate entities, such as the Brazilian Association of Medical Education (ABEM), Brazilian Association of Nursing (ABEn), Federal Council of Medicine (CFM), Brazilian Medical Association (AMB), Corporate Experts, in order to build a structural agenda that serves carrier based National Policy on Human Resources for the NHS.

Observed on the news of the two newspapers surveyed that Cuba was the country that provided higher number of physicians for the program, which generated “disagreements” political order among Brazilian medical organizations and the federal government. In this sense, a wave of prejudice by Brazilian doctors who questioned the formation of Cuban medical professionals, as well as the remuneration policy for the same arose, considering that such a measure could devalue the category.

According to Sousa[14] it is undeniable that the situation of lack of doctors in cities of larger social, economic and health inequalities constitutes a complex phenomenon which is required from SUS over the past 25 years, a series of initiatives since the creation of poles education, training and continuing education for staff of the PSF in 1998, through the Program Internalization of Health Work (PITS) strategy for strengthening the attachment of the professionals of the Family Health Program (PSF), especially physicians, who, in several studies, indicated the high turnover of these workers, was responsible for the expansion of health care coverage and access to various needy areas of health care.

Character of News

About the character of news, it is noted that 178 (49%) of these are pessimistic, showing that there were journalists and readers contrary to the program. It was noticed that the two newspapers most reports were written by the same journalists, for this reason the publications had similar perceptions. The news from “neutral” nature represented 101 (28%), and “optimistic” 83 (23%), the sum of these has greater than “pessimistic” value categorization.

Despite the positioning of these two newspapers to or against the “More Medical Program” its initial membership was 4,025 municipalities. These doctors demanded 16,631 1,878 accessions of priority municipalities; 2147 in other locations, in accordance with. The Ministry of Health, through the Secretary of Labor Management and Health Education (SEGTS), answered in part the demands of municipalities[23].

In November 2013 were already in operation 3,664 doctors in 1,098 municipalities and 19 Indigenous Health Districts (DSEI), these 819 doctors were Brazilians, 2,845 medical exchange students spread across cycles. In Cycle 1, 625 physicians and 680 physicians Brazilian exchange students and 2, 194 doctors and 2,165 medical Brazilian exchange students. Lack meet the demand of 6,040 spaces in cities classified as priority and 6,999 vacancies in non-priority. Of total priority municipalities, 1,098 received at least one doctor 780 not yet received no medical.

According to Brazil, (2014c) in the first cycle of the program, despite a significant demand for these professionals municipalities, only 381 doctors were bound. In the second edition of the program, joined 2,838 munici-

---

**Figure 4** Tree of most mentioned words in news headlines.
**Title Character of Publications**

About the title character, the newspaper Folha de São Paulo has 110 (42%) of the publications of negative slant, while prevailing in the newspaper Correio Braziliense is neutral character with 50 (49%) of the publications, which does not attack nor defends the More Doctors Program.

How employs Table 2, the news was categorized into eight groups: primary care, corporatism, which concerned mainly perpetrated themes entities representing physicians; financing, which consisted of topics related to investments and spending on the program, vocational training, which addressed curricular reform in undergraduate medical, management, linked to government strategies for implementing the Program More Doctor; family health, in news that spoke of the importance of the strategy be strengthened through federal program in question; politicians, who mostly was led by the joint political party to support or oppose the program; associated topics, which indirectly had some connection with the research theme.

It is observed that Management is dominant among news newspaper Folha de São Paulo, and is also Associate Themes majority in the comparison between the two newspapers. Also a topic that was of interest to readers, which is vocational training, ranks third in both newspapers. Also a topic that was of interest to readers, which is vocational training, ranks third in both newspapers. It also showed that neutrality to pass the news was often unclear.


<table>
<thead>
<tr>
<th>Categories</th>
<th>Journal</th>
<th>Folha de Sao Paulo</th>
<th>Correio Braziliense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care</td>
<td>2</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Corporatism</td>
<td>36</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Financing</td>
<td>9</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Vocational Training</td>
<td>62</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td>Management</td>
<td>69</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>Family Health</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Associated Topics</td>
<td>75</td>
<td>44</td>
<td></td>
</tr>
<tr>
<td>Politicians</td>
<td>8</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Grand total</strong></td>
<td><strong>363</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Analysis if the news had Featured or were the cover story of the newspapers, it was noted that of the total, about 86% were not and 83% cover were not highlighted. Even if the program proves a success and having so much impact, only nine (21%) cover stories were optimistic about the program and six (10%) were featured in them.

**OTHER CONSIDERATIONS**

The survey did not assess the More Doctors of the Brazilian Federal Government program, but the way that the media conveyed the same information about the company. The choice of the two newspapers was intentional because they are large circulation: one national and the other in the capital of the country, giving rise to the executive, judicial and legislative powers.

After analyzing these stories, research has shown that the media is an important tool for the formation of opinion, being observed through the notes that readers sent to the newspaper. It also showed that neutrality to pass the news was often unclear.

Despite reports of negative character have a large percentage in the analysis, there were opinions of journalists and readers who saw the positives in implementing the More Doctors Program. Key points discussed by journalists who were concerned the positioning of medical professionals represented by their counsels, so that the vision of how the program would affect the lives of Brazilians remained in the background. Another point to note is that the media does not explain the complexity of the facts, but the opinions of some journalists take greater prominence.

It is important to note that the Correio Braziliense, despite being the capital of the country, the Ministry of Health headquarters, formulator institution of More Doctors Program, had no great impact as the Folha de São Paulo. Fact that, in theory, justified by the potential of this national newspaper.
Newspapers Folha de São Paulo e Correio Braziliense: what they say about the program more doctors?


Correspondence address to:
Indyara de Araujo Morais
NB 14 lote 10 ape 602 - Taguatinga
CEP 72115145 - Brasília, DF, Brasil
indydymorais@gmail.com

REFERENCES


