

# Public health, science and society: challenges and perspectives

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**THIS ISSUE OF THE PERIODIC 'SAÚDE EM DEBATE' IS THE RESULT** of the institutional commitment of the Sergio Arouca National School of Public Health (Ensp), of the Oswaldo Cruz Foundation (Fiocruz), in partnership with the Brazilian Center for Health Studies (Cebes), for the dissemination of knowledge about the impact of the COVID-19 pandemic on science and society. The institutional and organizational effects associated with sanitary control measures are presented and discussed by articles, essays, and reviews in this special thematic issue.

The first waves of the COVID-19 pandemic challenged the classic model of coping with communicable diseases due to the absence of strictly pharmacological actions in the public health portfolio: vaccines and antivirals were not available to control the incidence and reduce the lethality caused by SARS-CoV-2. At that moment, it was left to the field of public health to propose social distancing measures of different degrees that paralyzed the economic activity and affected, in particular, vulnerable populations, the poor, women, and the working class in general. The pandemic deepened the social inequalities experienced in Brazil and in the world. The absence of public policies to prevent COVID-19 and the dismantling of legislations, as well as social protection networks, significantly impacted the health of workers in several categories<sup>1</sup>.

The implementation of massive social distancing measures, including quarantine, exposed scientific arguments and transformed government policy for the pandemic into an arena disputed by denialist political leaders, such as President Bolsonaro, messianic opinion makers in the new social media and, paradoxically, sectors of the medical profession. The transitory lack of technological solutions to solve the pandemic has increased active denialism in relation to the effectiveness of biomedicine, a fact still observed on a disturbing scale, in the smear campaign of vaccines against the new coronavirus.

The denialist decisions of the Brazilian president for the control and mitigation of the COVID-19 pandemic also subjected the national cooperative federative arrangement to a monumental stress. He became internationally recognized as an example of a leader who responded chaotically, irresponsibly, and ineptly to the threat of the pandemic, vetoing the lockdown, promoting ineffective drugs, and spreading vaccine hesitancy<sup>2</sup>.

This finding motivated the establishment of the Parliamentary Commission of Inquiry (CPI) in the Federal Senate, in early 2021, to investigate the conduct of the Federal Executive and the Ministry of Health (MS) during the first cycles of the pandemic. The CPI listed the deliberate initiatives of the Brazilian president, who subordinated the MS to his denialist

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agenda, threatening government action throughout the federation. The CPI found that not only there was an omission by the official media in the fight against rumors and misinformation, but there was also a strong performance by the top government, especially the president of the Republic, in promoting the dissemination of fake news<sup>3</sup>.

There is no doubt today that the COVID-19 pandemic interrupted the long and relatively stable relationship of contemporary society with the massive events of illness and death associated with communicable and parasitic diseases. Classic studies have drawn attention to the role of universal access to water, sewage facilities, and food safety for the initial health progress of central economies.

However, from the 20th century onwards, vector control, immunization, and the continuous introduction of new drugs took a leading role in medical-sanitary interventions, reducing collective risk. Even in peripheral countries, without urban infrastructure and effective universal access to health care, the impact of vector control, vaccines, and new drugs in reducing morbidity and mortality from infectious and parasitic diseases was remarkable<sup>4</sup>.

In Brazil, for example, since the 1950s, a significant decrease in morbidity associated with infectious and parasitic diseases has been observed. Biomedical interventions kept this group of diseases under control, although with a high incidence and lethality in areas without adequate housing and sanitation conditions and access to specialized and hospital care. In terms of lives lost, the price of this model of spatial segregation and unequal access to health care during the pandemic, added to the denialism of the federal government, has been very high for the Brazilian population. This evidence is especially disturbing when it is confirmed that vaccines to control COVID-19 have not been made available to the poorest nations on the planet on the scale observed in Brazil. In this tragic scenario, the works gathered in this special thematic issue point to the challenge of building a new model of social development and to the urgent expansion of the regulatory role and provision of SUS services.

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