

# The Project “Mais Médicos” and training in and for the Brazilian Health System (SUS): why change it?

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We are building a public health system that seeks a comprehensive care, the promotion of health and faces the social determinants aspects of health problems.

Aiming to strengthen the Unified Health System (SUS), about to complete 25 years old, the Ministry of Health (MS) develops actions that meet the restructuring of the care model, giving priority to primary care and the proper training to necessary changes in the practices of health and health education. In this way it recognizes the accuracy of inter sectorial work with the inter-ministerial participation and support of many partners.

The Secretary of Labor Management and Health Education, established in 2003, promotes the National Policy on Permanent Education in Health as a guiding thread of transformation for professional practice and health care organization strategies. Recent inducers policies proposed by the MS and the Ministry of Education (MEC) trigger and enhance the change on the health professional profile and the work at health field. The challenge is a way that allows a reflexive and contextualized practice, an appropriate pedagogical praxis to overcome the strictly technical and traditional training, focusing on the formation of ethical individuals, critical, reflective, collaborative, historical, transformers, humanized and with social responsibility.

The “*Programa Mais Médico*” (More Doctors Program), introduced in Brazil in 2013, as part of a series of actions to reduce inequality of access to the Basic Care Applicable, has a fundamental role in strengthening and consolidation of Basic Health Care, with the provision of emergency doctors in vulnerable areas. It becomes complete along with the investment in the improvement of the health system infrastructure, in particular basic health units and to the increase of enrollment and educational reforms for the graduation courses in medicine and medical residency programs in the country. It is expected to create, by 2017, 11,500 spaces in medical graduation and 12,400 vacancies in the residence program for training of specialists by 2018, focusing on the appreciation of basic care, the Family Health Strategy and priority areas for the SUS. It has been authorized 4,460 new vacancies graduation in public and private institutions in addition to the selection of 39 municipalities to create new courses. In 2014, the federal government authorized 2,822 new spaces at the residence program. The opening of new courses and graduation vacancies considers the need of the population and the infrastructure of services, prioritizing locations and regions with a shortage of professionals, such as the Northeast and the North, and countryside cities in all regions of Brazil.

The “*Programa Mais Médico*” (More Doctors Program), initiated the review of the National Curriculum Guidelines (DCN) for medical graduation in 2014, affirming the centrality of training basic care, the perspective in training for the health care network in the SUS, the improvement of teaching integration-service-community, strengthening the perspective of indivisibility of training, health care and public participation. The DCN are designed for the following integrators areas: Health Care; Health Management; Education in Health, which permeate the educational process, indicating methodologies that focus on student participation in the construction of knowledge and proposing the formation of teachers and tutors for knowledge, recognition and development of these axes during the course. In order to strengthen the integration of higher education institutions (IES) responsible for providing the courses with the Municipal Secretary and State Health, acting as managers, will be offered to sign Organizational Contracts from Public Action Education-Health (COAPES) that allow reordering the offer of courses and vacancies at the residence program and a health care structure with appropriate conditions.

The “*Programa Mais Médico*” (More Doctors Program), builds structural actions to improve medical education, and universalize the access of the population to services and meets the SUS legislation which orders new practices. These require innovations and changes in the training

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of health professionals at different levels of training, education in health, production of knowledge, permanent education and applying the care model offered. Programs such as the Program of Education for Work (PET-Health) and the multi-professional Residence Program, exemplify actions that amplify appropriate paradigmatic changes to new demands. Generate training and inter-action in the teaching-service-community integration at strategic fields of activity for the SUS, in priority networks, defined in partnership with managers from local and regional realities. They represent joint actions from MS and MEC, focused on the training for all health professionals.

The debate on education and health provision, which values the match between humans, the commitment to integrity and equity, which responds to the unique needs, the closest approach between IES and service, health and education, which triggers into reinterpretation, reconstruction and production of a new knowledge, in an opened ethical, esthetic and political meeting, with the clarity that we address an extremely complex social practice, which we learn every day, that we are educating and being educated, but we have much to be developed in theory and practice.