

Management of the Unified Health System (SUS) in the Contemporary Context

Health management today requires strategies capable of responding to the social, demographic, and epidemiological transformations that affect health systems. The Unified Health System (SUS) is one of Brazil's most important public policies; however, structural weaknesses, underfunding, and political instability have hampered the full implementation of its principles of universality, comprehensiveness and equity¹.

The consolidation of the SUS depends on consolidating management, improving the quality-of-care practices, and using technical instruments that support decision-making. Epidemiology, by providing the planning of health actions, can identify priority problems affecting the population, help better understand the health profile of communities, and ensure more effective public policies.

Another essential element in the current management of the SUS is the use of technologies and health information systems that expand the capacity for monitoring, evaluation, and organization of services. Advances in digital tools have contributed to improving access to information, supporting clinical decision-making, and reinforcing integration among different levels of care.

Care practices also require important transformations, with greater emphasis on more integrated approaches centered on the user and articulated with Primary Health Care (PHC), considered the main entry point and the structural axis of the care network.

This issue presents 13 articles addressing different dimensions of health management within the SUS context. Among the topics discussed is a study on governance in interstate border regions across two states and 53 municipalities, identifying, among other aspects, fiscal inequalities and financial dependence that affect the guarantee of access and continuity of care in regions where mechanisms for coordinated system management are lacking.

Another article highlights, after 18 years, the potential of Telehealth in Primary Health Care in the south of Brazil, showing that the use of this technology has expanded access to services, filled gaps in care, supported health professionals, and strengthened the problem-solving capacity of primary care.

A study on the spatial distribution of notifications of immunization errors in 853 municipalities in the state of Minas Gerais contributes to identifying factors associated with failures in the vaccination process and supports measures to enhance immunization practices.

By bringing together studies on governance in border regions, telehealth in primary care, integrative and complementary practices, among other themes, this publication seeks to foster dialogue among researchers, managers, and health professionals. The contributions gathered here broaden the debate on the challenges and possibilities of health management in the contemporary context, reaffirming the commitment to revitalizing the SUS.

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References

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