## Other perspectives on the Brazilian Health Reform

Tatiana Wargas de Faria Baptista<sup>1</sup>, Camila Furlanetti Borges<sup>2</sup>, Mônica de Rezende<sup>3</sup>

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THE INVITATION FOR OTHER PERSPECTIVES ON THE BRAZILIAN HEALTH REFORM to emerge comes at a time of turmoil, with political, economic, and social transformations in all corners of the planet, as well as retrogressive movements that put in check the advances obtained in decades of struggle for the recognition of rights, penalizing once again those who still sought to make their voices heard amidst their societies. The responses and reactions of each country and each locality to the new times have been very different and, quite often, contradictory, producing tensions and insecurity in relation to what is yet to come. Countries that still struggled to pursue rights or affirm their conquests have suffered in a special way from neoliberal, conservative, and, at times, fascist attacks. Brazil is an example among many who face the challenge of repositioning and repoliticizing the social debate at the risk of losing the rights established by law, having to face a fragile institutionality of democratic exercise and with many issues arising from its history as a colony and its period of dictatorship, which is expressed in a structure of class, sexist, racist, and extremely unequal.

The objective of this thematic issue was to bring together contemporary issues that problematize the way of building a health policy in Brazil that guarantees the dignity and 'well-being' of the populations<sup>1</sup>. Since the Federal Constitution of 1988, efforts have been made to consolidate rights, but an extensive agenda of demands still needs to be asserted, dealing with the legitimate question: 'Right for whom?'. The process of political struggle in the field of health has never been simple or easy, and exclusions have also always been present, even if in a less adverse scenario than the one we now find ourselves in. Today, we are faced with explicit policies of retrogression, with the valorization of a death policy, a necropolitics in the terms of Mbembe<sup>2</sup>, with the genocide of groups and people that seem to be of no value to those who fight to maintain their privileges.

In such scenario, this issue presents itself as a resistance effort. We understand that it is necessary to insist on the defense of life with the commitment and the respect for diversity and for what we are in that which we have historically built; this is because we have taken very seriously a broad concept of health that understands that: if it has to do with people and the well-being of people and populations, it has to do with health. Taking care of people, whether their physical pain or suffering, also concerns understanding why and how people, groups and populations get sick and suffer; how they live and where they belong. Health is not something that isolated on the individual. It is the product of a society, of political, economic, and historical choices – and it also has to do

<sup>1</sup>Fundação Oswaldo Cruz (Fiocruz), Departamento de Administração e Planejamento em Saúde (Daps), Escola Nacional de Saúde Pública Sergio Arouca (Ensp) - Rio de Janeiro (RJ), Brasil. *twargas@gmail.com* 

<sup>2</sup> Fundação Oswaldo Cruz (Fiocruz), Escola Politécnica de Saúde Joaquim Venâncio (EPSJV), Laboratório de Educação Profissional em Atenção à Saúde (Laborat) - Rio de Janeiro (RJ), Brasil.

<sup>3</sup>Universidade Federal Fluminense (UFF), Instituto de Saúde Coletiva (ISC), Departamento de Planejamento em Saúde – Niterói (RJ), Brasil.



with conditions for developing the potential of each and every individual. So, when we want health, it's the same as saying that "we don't just want food; we want food, enter-tainment, and art"<sup>3</sup>.

By provoking other perspectives on the Health Reform in Brazil, understanding it as a movement that sustains and mobilizes different actors from various segments and social and institutional sectors in the defense of the right to health, we seek, above all, to value the look and the speech of the outskirts and of the different movements, segments, and social groups that, for a long time, have been named as 'minorities' and that, since always, face a long history of non-recognition and disrespect.

With the production of this thematic issue, we wish to enunciate a plural Health Reform project, with the voice of women, LGBTQI+ populations, black women, black men, indigenous peoples, riverside dwellers, proletariat, landless workers, workers in general, people deprived of their liberty, people with psychological distress, people with disabilities and many others who are pushed to the edge of State policies. We want to produce a space in which these voices can speak for themselves, where they can echo, discussing policies, the State, rights and non-rights. In proposing this thematic issue, we envisioned a provocation: which would be the issues that could mobilize a Health Reform based on the experiences of these people? Unfortunately, it was not possible to cover all of those voices in this issue, but we hope that this production will come out as a trigger for new spaces for vocalization and production to open up on different sides.

In the contact with the readings on the past and the present, we approach institutional histories and academic efforts to develop policies in the different areas of health. We sought to bring stories, reports, and analyzes about the Health Reform and about health policies and practices – which do not always reach visibility in official and academic circles – verbalized by those who study the Unified Health System (SUS), who use the SUS, by people and places of speech that call for a dignified life and who still dream of an ideal of health.

The Brazilian Center for Health Studies (Cebes) and the journal 'Saúde em Debate' not only welcomed that proposal, but also constituted the best space to provoke this debate, since it was in this journal, ever since its first issue, that dialogue was promoted between groups and knowledge and the discussion towards a democratic reform in health was strengthened, in which "all were its builders"<sup>4</sup>.

Democratizing health today and reaffirming the expanded concept of health requires that we do not turn a blind eye or ears to what happens to communities across the country, to structural income inequalities, and also to the daily violence, the result of racism and structural sexism. It is not possible to guarantee health without well-being and a dignified life. On the one hand, we continue to struggle for investment in public policies, to guarantee work, income, access and ownership of land, housing, education, culture, food, environment, transportation, freedom, access to health services, as stated in the Report of the VIII National Health Conference, from 1986; on the other hand, we base the fight against the colonialist, patriarchal, sexist, and racist culture of our State and society.

We dedicate this issue to the social leaders who have died in recent years, fighting to defend the lives of all of us. We dedicate it to every woman who has suffered violence and who, in her resistance, denounces sexism. To the LGBTQI+ people who, by existing and asserting themselves, show the cynicism of a hypocritical society. To all black women and black men who, in the face of the violence they face every single day, show the racism that inhabits us. To the indigenous peoples who resist and survive revealing the power of

a struggle when you think together. To all health workers, managers, professors, and researchers who understand that their place in all this is to participate in the daily struggle and to help build mediations to achieve a better life for all. Finally, to the children who have had their right to exist or their potency of future cut short by violence and lack of access to education and health. We cannot allow this to continue to happen.

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## Collaborators

Baptista TWF (0000-0002-3445-2027)\*, Borges CF (0000-0002-0418-739X)\* and Rezende M (0000-0001-8710-4598)\* have equally contributed to the elaboration of the manuscript. \*Orcid (Open Researcher and Contributor ID). ■

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