Why remember Sergio Arouca?

Sergio Arouca left us on August 2nd, ten years ago. He was just 61. His death came far too early and was a great loss to the health field in Brazil.

Some young public health professionals have heard of Arouca and Brazil’s health reform process (what reform exactly?). Many students of collective health know vaguely what we are talking about.

As a modest tribute, particularly for those who never knew him, I wish to recall the importance of this public health physician, political militant and undisputed leader in formulating the concept of Public Health and Brazil’s health sector reform.

I met Sergio when I was a medical student at Campinas University, and he a young professor recently hired by the Department of Preventive and Social Medicine. I had the privilege of sharing in activities with him from then on. That was 1968, the year the dictatorship toughened its stance and repression intensified.

In the 1970s, Arouca stood out for his critical analysis of traditional Public Health and the Preventive Model, and his advocating Social Medicine. He was a natural speaker and a charismatic and entertaining lecturer who taught change was possible. He joined the Latin American debate about education in health, led by Juan Cesar García, and health sector planning, with Mario Testa and others. He militated in the (then clandestine) Brazilian Communist Party, in contact with sympathizers abroad, including Giovanni Berlinguer in Italy. He worked in Nicaragua after the Sandinista revolution.

Arouca encouraged nationwide alliance building – among progressives from institutions, organizations, trade union and social movements – to press for new health policy directions in Brazil. He hoped to build a common reform project around which to gather political influence to change Brazil’s dual and unequal health system, which would be conveyed and institutionalized by the Health Sector Reform Movement, of which he was a leading member.

Unsurprisingly, he joined the National School of Public Health, in the still little-known Fiocruz, helping the phoenix rise. He advocated shifting the political struggle to the apparatus of State, in alliance with dynamic social sectors, as crucial to creating conditions for democratic citizenship. He was calmly convinced – and convincing – that political strength lay in working together for political change.

Arouca was one of the architects of Public Health, a new analytical approach and field of knowledge with sound epistemological foundations and its own historical and conceptual frame, which formed the cornerstone of Brazil’s health sector reform. His thinking was dialectic: he argued by drawing and reconciling logical or historical contradictions. He made complex or opaque theories readily understandable. He questioned the idea that “public” meant “State” as opposed to “private”, recasting it as a space for expression, engagement and negotiation of individual or collective demands. The principles of Public Health and the reform stood in opposition to the dictatorship and became established during the process of political transition in the mid-1980s.

Arouca listened; he respected others’ views, shared knowledge, led discussions, introduced innovative ideas and decoded polemics. He was an outstanding and affable negotiator, vehement when necessary but never aggressive, with a special skill for building non-party fronts to further common causes despite ideological differences. Essentially a subversive, he dismantled prejudices with ease, marshalling theoretical and empirical knowledge, political practice, skilful networking and good humour. He made some mistakes too; he was only human.

What would Arouca say about the state of the SUS, 25 years on; or the disrepute of party politics; or the legitimate, intense, diffuse, even violent clamour from the streets?

We cannot know, but his story can certainly inspire us.

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