## Health Surveillance: main guiding principles necessary for adequate planning of the decentralization and regionalization of the system

The process of decentralization of the Brazilian health system, which will transfer federal services, responsibilities and funds to the state and municipal management bodies, requires strong and decisive action. This action must be geared to the qualification of practices in every aspect of the system, including the necessary transformations which must be implemented in the management organizations. This drive comes with the increasingly pressing need for the ongoing process of qualification of managers and professionals from the many departments, sectors and institutions. This is required for understanding the dynamism inherent to municipal systems, the recognition of the need for permanent regional rearrangements and the coexistence of an articulated tripartite management, with its indispensable prerogatives of centralization of actions, some of which are at state level and others at federal administration level.

In the current configuration and context of the Brazilian health system, Health Surveillance must create opportunities for the many professionals and managers to acquire a strategic and broadened vision of the concept of health care as a guiding principle for care, ranging from actions of health promotion, prevention and control of illnesses through to combating diseases. By associating the concepts of risk and vulnerability, harnessing them to processes of decentralization and regionalization, and also promoting the democratization of the definition of priorities and strategies for intervention and monitoring, the Brazilian Health Surveillance System moves forward by incorporating broader objectives.

Brazil is in a complex socioeconomic context and an unbridled development process, with characteristics that are specific to a country of continental proportions, which combine high rates of morbidity and mortality from non-communicable chronic diseases. It also faces the persistence of diseases linked to poverty and social exclusion, the emergence of new diseases, the growth of violence and road accidents, both manifested in various forms, and an aging population. Therefore, it is imperative to assess the reorganization of health services, linking promotion, surveillance and care of health in the daily lives of all actors in the system, especially the decision makers.

Fulfilling its mission as a vehicle for training and the dissemination of knowledge of ABRASCO, in this issue *Revista Ciência & Saúde Coletiva* presents a selection of articles related to Health Surveillance. It starts with a debate on a proposal for monitoring decentralized health surveillance, with a focus on performance and quality. It then provides a platform for the publication of original articles that: (i) address the information systems essential for this monitoring; (ii) reflect on the individual and collective risks and vulnerabilities that abound in the Brazilian demographic and epidemiological working environment; (iii) present the causes and characteristics of road transport accidents; (iv) address violence in diversified situations; (v) analyze the health situation of social groups and populations in different contexts; and (vi) assess and discuss differentiated aspects of some communicable and chronic noncommunicable diseases. It then concludes the issue with an updated review article on the knowledge generated in environmental health.

Thus, this issue of C&SC hopes to contribute to the reflections of its readers, especially about how to broaden operations in the health field, especially in the context of policy formulation. It also addresses the work process developed by and together with various social groups, as well as the critical analysis of practices developed and the (re)definition of topics of intervention and research, seeking an enhanced way of tackling individual and collective needs.

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