

Editorial

THE BRAZILIAN SANITARY MOVEMENT (Movimento da Reforma Sanitária, known as MRS), since its initial debates about the conformation of a national health system, has treated critically the proposals for a simplified and restrict first level of care. The journal *Saúde em Debate*, as a divulgation organ for sanitary thinking, since its first issue, dated from October 1976, has published several articles about such theme. We highlight two texts which present elements that still today may help us reflect upon the practices in this level of care and about problems faced by the Unified Health System (Sistema Único de Saúde, known as SUS).

Jairnilson Paim, in the text entitled *Community Medicine: introduction to a critical analysis*, among other things, calls attention to the relation between public and private systems of services provision. Anamaria Tambellini, with the text *Community Medicine: implications of a theory*, stresses the pretension of the services in establishing a regulatory and institutionalized intervention on life, defending the need that the practices in health must contribute to “liberate man in his ‘experience’, which means providing him the means to comprehend and control his ‘way of walking life’ and, therefore, liberate the knowledge about such experience which is, today, professionally monopolized”.

In this special issue, which holds as central theme the evaluation of Primary Health Care, it seems appropriate to recover reflections that the MRS has been developing since its origins and that have contributed for the constitution of SUS as a project that is neither restricted to the health sector nor to a level of care, but intends to be integral and points to the necessity of a new form of political and social organization.

The discussion that the Movement held on the relation between the public and private sectors and the proposal for the nationalization of health announced the problems which we would later have to face. The neoliberal policies, implemented in the 1990’s, contributed to the increase of the private sector, which, far from being complementary, as established in the Constitution, became preponderant the offer of services, especially those of medium and high complexity, like diagnosis and therapy services and hospital care, not forgetting the huge advance of private health plans in outpatient care.

These same policies have impoverished Primary Care with the adoption of selective and focused programs, stalling the implementation of a model based on principles, like the integrality and equality of access and treatment, in which the first level of care has an important role in the conformation of networks, in the accountability for the care and as the main way of access to SUS. The effects of the new restrictive policies are still being felt, despite the achieved advances, like the universalization of Primary Care, which alone is insufficient for assuring comprehensive care.

In the field of the relations between professionals and users, one thing that must be recovered is the critique of the monopoly of knowledge by health professionals about the health-disease process and the consequent prescriptive interventions, for we are far from instituting practices that favor the autonomy of people to decide about the “way of walking life”.

Over the last decade, entities that compose the Brazilian MRS, among them, Cebes, have reassumed the role of articulating the movements in defense of SUS and criticizing the policies that prevent greater advances in the SUS, like low public funding, resulted largely from

the subordination of social policies to economic ones. We highlight the struggle for expanding the federal budget for health, with the National Movement for the Defense of Public Health (Movimento Nacional em Defesa da Saúde Pública, known as Saúde + 10), which collected 2,2 million signatures for the Popular Initiative Bill that proposed 10% of Federal Revenues for health.

The current political-electoral moment is propitious to the exposure of problems and possible solutions for the Brazilian health system. The MRS has been presented as the advocate of the demands of health workers and users, showing proposals that shall compose a new project for national development, in which health has a central role in the improvement of the living condition of the entire Brazilian population, placing, thus, health on the national agenda.

Cebes Board of Directors