Priorities, achievements, and challenges in the management of a committee of the Brazilian Association of Collective Health

Prioridades, conquistas e desafios na gestão de uma comissão da Associação Brasileira de Saúde Coletiva

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ABSTRACT  Continuing initiatives to make the Committee of Social and Human Sciences of the Brazilian Association of Collective Health (Abrasco) more inclusive and plural, such as the cycle of symposia during the administration 2014-2016, the management experience in this Committee during the period 2017-2019 will be presented with the purpose of highlighting its priorities, achievements, and challenges. A documental analysis of the master plans and records of activities promoted by this Committee at scientific events was conducted, resulting in the division of the text in three parts: a comparative analysis of its current Master Plan; a list of the activities promoted by this Committee at scientific events; a discussion on the evaluation of scientific production. The renewal of the institutions’ representatives that are part of the Committee increased the number of memberships as well as a bigger regional diversity, which made this Committee the only of the three committees in the Association with institutional representation in all regions of the country. This expansion occurred in the middle of a very singular context in the national scientific policy, since the prevailing evaluation criteria of scientific production, usually quantitative, were being questioned.


RESUMO  Dando continuidade a iniciativas para tornar a Comissão de Ciências Sociais e Humanas em Saúde da Associação Brasileira de Saúde Coletiva (Abrasco) mais inclusiva e plural, como o ciclo de simpósios na gestão 2014-2016, a experiência de gestão nessa Comissão no período de 2017-2019 é apresentada com o objetivo de destacar suas prioridades, conquistas e desafios. Uma análise documental de planos diretores e registros de atividades promovidas pela Comissão em eventos científicos foi conduzida, resultando na divisão do texto em três partes: uma análise comparativa de seu Plano Diretor atual; uma lista das atividades promovidas pela Comissão em eventos científicos; uma discussão sobre a avaliação da produção científica. A renovação dos representantes de instituições que integram a Comissão resultou no aumento do número de integrantes, bem como da diversidade regional, tornando-a a única das comissões da Abrasco com representação institucional em todas as regiões do País. Essa expansão se deu em meio a um contexto singular na política científica nacional, já que os critérios de avaliação da produção científica vigentes, predominantemente quantitativos, estavam sendo contestados.

Introduction

In January 2019, the composition of the Committee of Social and Human Sciences of the Brazilian Association of Collective Health (Abrasco) included 54 representatives from 29 undergraduate and graduate institutions in Brazil, headquartered in 10 states of the federation and distributed in 5 regions. More than half of these institutions were concentrated in the Southeast on the date mentioned, as well as in the composition of the other two Committees that are part of this Association: Epidemiology; and Policy, Planning and Management. Unlike these two Committees, with institutional representation in four regions of the Country, the Committee of Social and Human Sciences in Health (CSHS) became the only one of this relevant Brazilian health association to gather representatives of institutions from all Brazilian regions during the last term, between the years 2017-2019. This institutional arrangement expresses the need to change a framework of inequities in force in graduated courses in public health in the Country:

If, in the 1970s, there were less than 10 graduate programs (PPG), in 2013 there were 75, [...]. However, the programs reflect a strong regional concentration, 51% of which are based in the Southeast and only 2% in the North.[2(2138)]

In addition to this achievement, a challenge for the Human Sciences Committee is the promotion of classroom activities, affected by short-term financing restrictions. This restriction affected the set of 3 commissions, 2 committees, 3 forums and 21 thematic groups of Abrasco, an entity created in 1979 and which, like the Brazilian Center for Health Studies – Cebes (created in 1976), participated “in political events which resulted in the formulation of the Brazilian Sanitary Reform project and in the writing of the health chapter of the 1988 Constitution”[2(114)], although it played “a role in bringing together and articulating graduate programs”[2(114)] in its first years.

With the aim of presenting these and other achievements and challenges – as well as priorities, outlined below – in the management of the Human Sciences Committee in the 2017-2019 triennium, we will count – in the double sense of the term, narrating and quantifying – activities developed in scientific events over the period. Unlike Ianni et al.,[3] we did not interview coordinators of the Human Sciences Committee in order to investigate the institutionalization of social sciences in health at Abrasco, because we intend to focus on public interventions promoted by the said Committee. In addition, our essay, containing reports of actions conducted at scientific events, is also not confused with the documentary analysis of congresses in the CSHS area conducted by Trad[4] because it does not dwell on their scientific production. Experience reports point out ways in which the description of activities promoted at congresses can reveal characteristics of the health area, although we do not intend, as Capucci et al.,[5] to conduct an assessment of such events. Finally, these and other studies on the field of CSHS contributed a lot to the elaboration of this essay on the management of the Human Sciences Committee, as we will see below.

Methodological procedures

We will start the presentation of this essay containing reports on the management of the Human Sciences Committee in the 2017-2019 triennium by its three master plans (1997; 2014-2016; 2017-2019), in order to indicate the peculiarities of the current document, among them, the three priority areas of action. Then, other documents available on the Abrasco website will contribute to the elaboration of a table containing information about the activities developed by the Human Sciences Committee in scientific events, such as year,
region, exhibitors and areas of activity. In the end, one of the three priorities of the referred Committee will be discussed, the CSHS in the evaluation of scientific production, highlighting the proposals for criteria that emerged during the debates in the mentioned activities, among them, the social impact of scientific knowledge. In other words, we will address the Committee’s priorities first, then its achievements and, in the end, one of its challenges.

A set of documents entitled “library of the Committee of Social and Human Sciences” is available on Abrasco’s website, relative to the records of activities developed by the Human Sciences Committee in recent years, as well as to the result of projects developed within it, so that this documentary and audiovisual collection will be our main source of data. Although records of meetings of the Human Sciences Committee (virtual, presentia, mixed and local) are available on its website, we will focus mainly on the records of its public interventions, that is, symposia, special sessions, conversation circles and roundtables that took place at scientific events between the years 2017 and 2018, as well as in a national seminar organized by members of the Committee, in the same way as in their master plans, bringing together a total of seven documents.

In these academic discussion spaces, we had the opportunity to note that the presentations of the exhibitors were as relevant as the subsequent debates with the participants, thus confirming the potential of the debates in the field of public health:

There is also an important aspect related to the socialization of new generations of researchers that I would like to add: the emphasis on punctuation of what is published makes irrelevant activities crucial for the development of criticism and scientific communication, such as debates and centers of studies [...]

The conditions of possibility of these activity records refer to the attributions of the Human Sciences Committee, in the sense of representing the interests of higher education institutions with undergraduate and graduate courses in public health that indicated researchers and professors to integrate this instance, as well as the policy transparency science adopted and valued by it. The material gathered on the Abrasco website was produced by the members of the coordination nucleus of the Human Sciences Committee, all documents having been circulated by participants in public interventions before being made available on the page of this association.

Continuities and discontinuities between Master Plans

According to Ianni et al., it is only in 1994 that Abrasco, institutionally, structures the social sciences area, through the Committee of Social Sciences in Health and the initiative to organize the Brazilian Congress of Social Sciences in Health.

Only two of the seven Brazilian congresses promoted by this committee were ‘social sciences in health’, which took place in the 1990s, the remaining five having been ‘social sciences and humanities in health’ and held in the 21st century. In the Master Plan for the 2017-2019 tree-part term, it is stated that the Human Sciences Committee has gradually become more inclusive and pluralistic over these decades, precisely because it crosses the frontiers of Social Sciences.

One of the challenges pointed out by the Abrasco directors interviewed by the aforementioned authors concerns the need for “greater objectivity by the Social Sciences Committee, establishing a more structured plan for the commission in the form of a master plan” in a way that it is outdated, since the last two management teams of the Human
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Sciences Committee – 2014-2016 triennium and 2017-2019 – operated and operate with such an administrative document.9,10

In the Master Plan for the 2017-2019 triennium, the three axes of action of this Committee are listed:

1. In the Teaching axis: CSHS in public health undergraduate program; 2. In the Research axis: CSHS in the evaluation of scientific production; 3. In the Extension axis: the spaces and audiences of CSHS.9(2)

One of the challenges pointed out by the interviewees of the aforementioned authors is very close to the last line of action of the Human Sciences Committee listed above, “difficulty speaking to an audience outside the commission, in order to establish a dialogue with society and with the others areas of knowledge”3(2305), since it is stated in the description of the mentioned axis in that document that the action strategies must take into account

the desirable problematization of the way of conducting discussions on the CSHS beyond the walls of the academy, particularly with regard to the possibly hermetic and restricted language of the same.9(7)

The Master Plan for the 2014-2016 triennium indicated four guidelines for the CSHS area: political/academic/institutional development; incentive to research; incentive to production and diffusion; communication and dissemination. Executives of Abrasco point out some operational elements that, according to them, could strengthen the Human Sciences Committee, such as “the most proactive role of members in organizing congresses”3(2304). This centralization of the activities of the Human Sciences Committee at the congresses was problematized in the aforementioned document: “it is indicated below an agenda of events to be fulfilled, escaping from the single focus in the organization of the Congress of the sub-area of CSHS”10(3), this agenda is formed by a cycle of four symposia on the following topics: Teaching Social Sciences in undergraduate and graduate courses in Public Health; Research, Production and Ethics; Political-Institutional Development; Extension.

Furthermore, a document entitled “I Master Plan”, dated 1997, was also located, as a result of the revision of the first version11(2). There are no guidelines in this document, as in the Master Plan for the 2014-2016 triennium, nor action axes, as in the 2017-2019 triennium, but problems, strategies and recommendations divided into four topics: Teaching the social sciences and health: general problems; Teaching at different levels (undergraduate and graduate); Research; Services provision. The main problems pointed out in this pioneer document are far from what the coordinators of the Human Sciences Committee interviewed by Ianni et al.3(2305) call “superficiality in the use of theoretical references of Social Sciences and the vulgarization of the so-called qualitative analyzes”, pointing to a two-way path in training:

2.3. Encourage teachers dedicated to social sciences in health to seek training in the area of social sciences; 2.4. Encourage teachers with training in [social] sciences, dedicated to social sciences in health, to seek training in public health.11(4)

There are themes that permeate all the master plans elaborated over the last decades, such as the teaching of social sciences in health courses, this deserving two of the four topics of the 1997 Master Plan. However, there are themes that only appear in the last two master plans, as an extension. Only one of the master plans explicitly addresses political-institutional development, pointing out three main strategies:

Encouragement to hold regional events (seminars, colloquiums and others) in the interstices between successive National Congresses of CSHSC; Request from the various
representative bodies, especially Abrasco and the Forum of Postgraduate Coordinators in Collective Health, to include topics related to the area in their performance agendas; Promote the decentralized realization of the itinerant exhibition of the graphic and audio visual product of the Timeline Memory Project – 30 years of the Committee of Social and Human Sciences of Abrasco\(^{10(4)}\).

In this way, the Master Plan for the 2014-2016 triennium is doubly precursor, in the sense of displacing the activities of the Human Sciences Committee exclusively from the organization of national congresses of CSHS and consolidating the political and institutional development of the CSHS as an agenda. We will see below more information about these interstitial events between the national congresses.

### Activities developed in scientific events

The Human Sciences Committee, pursuing the events agenda recommended in the Master Plan for the 2014-2016 triennium and materializing the lines of action defined in the 2017-2019 plan, not only held a set of symposia but also other academic activities at scientific events during the management of the 2017-2019 triennium.

<table>
<thead>
<tr>
<th>Year</th>
<th>Region</th>
<th>Scientific Event</th>
<th>Activity(ies)</th>
<th>Exhibitors</th>
<th>Axes of action</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>North-east</td>
<td>3rd Brazilian Congress on Health Policy, Planning and Management</td>
<td>Symposium Political-Institutional Dimension of the CSHS (round tables: The plurality of political-institutional relations in teaching, research and extension: the action of the CSHS; Political-institutional relations, ethical evaluation and academic productivity in the CSHS)</td>
<td>Maria Helena Mendonça (Ensp-Fiocruz), Eymard Vasconcelos (UFPB), Maria Lúcia Bosi (UFC) and Carlos Guilherme do Valle (UFRN)</td>
<td>CSHS in the evaluation of scientific production</td>
</tr>
<tr>
<td>2017</td>
<td>South</td>
<td>10th Brazilian Congress of Epidemiology</td>
<td>Special Session The Collective Health Undergraduate Program and its curricular Guidelines: what are the next possible constructions?</td>
<td>José Joclilson Silva (UnB), Antonio José Costa (UFRJ), Alcides Miranda (UFRGS) and Marcelo Castellanos (UFBA)</td>
<td>CSHS in collective health undergraduate program</td>
</tr>
<tr>
<td>2017</td>
<td>North-east</td>
<td>National Seminar ‘SUS in the face of violence: experiences, resistance and proposals’</td>
<td>All programming</td>
<td>Leny Trad (UFBA), Roseni Pinheiro (Uerj), Eymard Vasconcelos (UFPB) and Suely Deslandes (IFF-Fiocruz)</td>
<td>CSHS spaces and audiences</td>
</tr>
<tr>
<td>2018</td>
<td>South-east</td>
<td>12th Brazilian Congress on Collective Health</td>
<td>Symposium Ways of knowing and acting in the CSHS (round tables: Space(s) and Audience(s) of the CSHS; Ethics and (in) Research: criteria for evaluating the scientific production under debate)</td>
<td>Mônica Nunes (UFBA), Raquel Rigotto (UFC), Iara Guerriero (Conep) and Nilson Costa (Ensp-Fiocruz)</td>
<td>CSHS spaces and audiences</td>
</tr>
<tr>
<td>2018</td>
<td>South</td>
<td>VIII Ibero-american Congress of Qualitative Health Research</td>
<td>Conversation circle Production and dissemination of knowledge in CSHS</td>
<td>Leny Trad (UFBA) and Maiko Spies (Regional University of Blumenau)</td>
<td>CSHS in the evaluation of scientific production</td>
</tr>
<tr>
<td>2018</td>
<td>Center-west</td>
<td>31st Brazilian Anthropology Meeting</td>
<td>Anthropology and Public Health Roundtable: convergences, deadlocks and possibilities</td>
<td>Daniela Knauth (UFRGS), Luiza Garnelo (Fiocruz Amazônas) and Inara Nascimento (UFRR)</td>
<td>CSHS in collective health undergraduate program</td>
</tr>
</tbody>
</table>

Source: Own elaboration.
The cycle of symposia, foreseen in the Master Plan for the 2014-2016 triennium, concluded three of the four events planned in the period: I Brazilian Symposium on Social and Human Sciences in Health – the teaching in focus, at the IX Brazilian Congress of Epidemiology, in Vitória (ES), 2014; II CSHS Symposium – Extension and Social and Human Sciences: scientific, social and political praxis in Public Health, at the 11th Brazilian Congress of Public Health, in Goiânia (GO), 2015; Preparatory symposium for the 7th Brazilian Congress of CSHS, on research, at the Sergio Arouca National School of Public Health of the Oswaldo Cruz Foundation (Ensp/Fiocruz), in Rio de Janeiro (RJ), 2016. The fourth and last symposium of the cycle took place in 2017, heading the table above, in which it is noted that six academic activities were promoted by the Human Sciences Committee between 2017-2018, also in the epidemiology and collective health congresses as in the 2014-2016 triennium, now including the policy, planning and management.

In addition, a roundtable and a conversation circle were promoted at scientific events in areas other than collective health; respectively, anthropology and qualitative research, in the latter case, an international congress. While the symposia cycle of the 2014-2016 triennium was concentrated in the Southeast and Center-west regions, the six academic activities promoted by the Human Sciences Committee in 2017-2018 also occurred in the Northeast and the South. In this sense, the current management of the Human Sciences Committee accompanies and expands guidelines already mentioned in the previous management on political-institutional development, the thematic variety and spatial heterogeneity of activities expressing “indicators of expansion of the degree of institutionalization and regional capillarity of the area”4(2378).

At a seminar organized by the Human Sciences Committee, a letter on the topic of violence was prepared and addressed to the Brazilian population12, in an attempt to overcome the mentioned difficulties of speaking to an audience outside the scientific community and addressing the axis of action on spaces and public bodies. Eleven preparatory seminars were planned for the 12th Brazilian Congress on Collective Health, 7 of them were performed, the referred seminar was one of them, being the one with the largest number of participants – 230 – and one of the first ones to happen.

The presence of residents and activists among the participants of this seminar indicates that other audiences, other than exclusively scientific ones, were reached by the Human Sciences Committee, in the same way as some proposals presented in the mentioned letter, among them:

Value, stimulate and disseminate health care initiatives for people deprived of their liberty that come from organized civil society itself, such as the group [...] and others formed by students from the penitentiary system, their friends and family12.

One of the two roundtables at one of the two symposia during public health events also addressed this axis of action related to extension. The teaching axis was also addressed in two scientific events, one of them outside the area of collective health, the National Curriculum Guidelines (DCN) having become an opportunity to debate the Graduate Program in Collective Health (GSC) during a special session:

The 3 nuclei of knowledge and practices also indicate this potential for intervention on walking along with the interpretation of health phenomena: management, care and health education13(2).

As a result of the dialogue between the coordination of the Human Sciences Committee and the coordinators of one of the two Abrasco Forums, the GSC, these debates during scientific events were even guided as a way
of highlighting ongoing changes in this association:

The creation of undergraduate courses in Collective Health, with the completion of the first classes from 2012, has introduced a new component in the field. As a product of this transformation, the name of the national association was changed and became the Brazilian Association of Collective Health. It is another fact that speaks in support of the consolidation of field [...20230].

Despite this articulation between performance and analysis in the DCN, the dialogue between students and teachers reveals that, in one of the 20 GSCs existing at the time, the CSHS sector was “very distant from this context of health services [...]”13(11), so that teachers in this area were more dedicated to “theoretical disciplines” and less to “field of practices”, differently from those in the epidemiology sub-area and, mainly, planning, policy and management13(13). These new courses demand proximity, since in a GSC,

there are students belonging to 9 indigenous peoples [...] they consider it relevant to occupy the space of non-indigenous people in the labor market, as in the health services created to offer care to the indigenous13(7).

The Human Sciences Committee’s axis of performance related to research was the most discussed in the activities promoted in scientific events, being present in three of the six events, differently from the other axes, in two of the six. If, on the one hand, this frequency justifies a separate topic to address the CSHS in the evaluation of scientific production, on the other, it shows a challenge for the management of this Commission in the 2017-2019 triennium: the lack of equity in the approach of the teaching-research-extension tripod in its calendar of events.

More crowds and new courses are placed on the horizon of the CSHS in the activities developed by the Human Sciences Committee in the 2017-2019 triennium, surrounded by conquests with regard to the achievement of what was considered a priority in the period, in the same way as other evaluation criteria of the scientific production, another of its challenges, as we will see below.

CSHS in the evaluation of scientific production

Considering the ideal type as a thinking framework, and not a historical reality, a typology of the insertion of social scientists in the field of health reveals that they hold a strong credential with little knowledge when in GSC, the reverse happening when in graduate studies in public health, a credential being considered the “quantum of technical, cultural, symbolic and political capital”14(43) and knowledge “production of concepts within theoretical matrices, as well as the production of methods and techniques aimed at health research”14(43). Based on this typology, the aforementioned CSHS teachers focused on the “theoretical disciplines” rather than the “field of practices” in the 20 GSC would exhibit more “potential for existence in the field of disputes”14(42) than those in the most of 70 postgraduate courses in public health spread throughout the Country, although the latter may show greater “power to explain health-related phenomena”14(42), both living with the process of metrifying the evaluation of scientific production and its effects: productivism, papyrocentrism and mimicry, or the “transformation of the article into the main product of scientific activity”15(626).

The criteria for evaluating scientific production instituted by the Coordination for the Improvement of Higher Education Personnel (Capes) are of great concern to CSHS researchers, in such a way that the specificities of CSHS in the evaluation of scientific production in the field of public health are an axis of action concerning research in the Master Plan of the
2017-2019 triennium, and one of the recommendations in this document is precisely...

 [...] the debate about productivism in the field of CH, insisting on the qualification regime in the area of political science, as it does not use bibliometric impact [...]9(6).

One of the researchers who made up the Advisory Body on Collective Health and Nutrition of the National Council for Scientific and Technological Development (CNPq) considered the evaluation of scientific production indispensable, and the quantitative bibliometric indicators available to make it inadequate, fragile and problematic, even though “benefiting from the illusion of ‘objectivity’ conferred by expression in numbers”16(1708).

This ‘supposedly scientific numerology’ assumes that “citations not only indicate quality but do so in a cardinal way, that is, two citations would indicate an article twice as good as articles with only one quote”16(1708), one of its effects having been the so-called “salami slicing (practice of ‘slicing’ a body of data into smaller pieces for publication in cases where a complete article would be more appropriate)”1(2143). In that scenario, readings are replaced by calculations:

Collapsing into a sea of texts that we ourselves encourage to grow exponentially, which probably contributes more to the deterioration of the signal/noise ratio of scientific communication than to innovation, we invoke the gigantism that we ourselves encourage as a limitation so that in fact quality is assessed – trying to read what is being published corresponds to the proverbial English expression ‘drink from the firehose’16(1709).

The alternative pointed out by Camargo Jr. is to aggregate “a small set of products (not necessarily publications) linked to the project or program that can be examined”16(1709), a proposal that converges with others in which the researcher is asked “to separate the five most important works he produced”16(1709), a peer review – a type of qualitative and non-quantitative evaluation of scientific production15 – based on the reading of texts selected by the individual evaluated. Here is one of the problems posed by the evaluation of scientific production: the transposition of program evaluation criteria for the researchers themselves.

In one of the symposia promoted by the Human Sciences Committee, the speaker at one of the roundtables pointed out seven strategies to resist productivism: 1 – institutionalization of Web Qualis books; 2 – recent creation of the Human Sciences in Health Working Group (CHS) at the National Research Ethics Commission of the Ministry of Health (Conep); 3 – approval of Conep’s Resolution nº 510/2016, related to studies in the human sciences area; 4 – expansion of lines of research in CHS in graduate studies; 5 – articulation with hard fields in multicenter projects; 6 – pressure for equity in decision-making bodies – Capes and CA-CNPq; 7 – resources in journals in the area of collective health, in the sense of increasing the number of reviewers in the CHS17 approach.

During a conversation circle, the speaker and the participants presented five other proposals for the evaluation of scientific production that illustrate the specificities of the CSHS: I – self-assessment, which does not need to be based on Capes’ criteria, and may involve reflection and taking into account identities and singularities; II – promote open symposia for the communities of postgraduate programs in public health, such as those promoted by the Postgraduate Forum in Collective Health; III – in these symposia, we need to talk more in order to answer what ‘quality’ is about and, thus, establish a qualitative criterion for the evaluation of scientific production; IV – highlight the social impact of research on the evaluation process; V – investigate the evaluability of scientific production, based on studies on public policy evaluation developed in the area of collective health18.
These proposals and strategies presented in face-to-face meetings of the Human Sciences Committee during scientific events add more criteria for evaluating scientific production than peer review, such as the case of the social impact of research. Recovering the contributions of other authors who addressed this emphasis attributed to indexes as the impact factor of publications, Lima draws attention to other relevant impacts in the field of public health, such as “impacts on policies, planning of intervention strategies and health programs, or on the organization of services that go far beyond the mere quantification of bibliographic references/citations”8(1724), as well as their partial incorporation into the current National Postgraduate Plan (2010-2020), because it proposes the adaptation of the evaluation methodology to new trends, which implies, among other changes, adding technological and social productivity indicators to the predominantly academic criteria already existing8(1725).

In addition, the author recalls one of the effects of what she calls “excessive evaluation”8(1724): the devaluation of publication in books. These and other effects point to the relevance of the strategy regarding the institutionalization of Web Qualis Books.

The expression in numbers as a synonym of objectivity is not only the object of criticism in the literature on evaluation criteria of scientific production in collective health, but also an instrument of criticism of the so-called “institutional standard for the recognition of intellectual production shaped in the natural sciences, especially in biomedicine”19(692). When demonstrating that the form of scientific dissemination of biomedical journals is dominant in the field of collective health, Costa approaches the evaluation of intellectual production in this field by the Qualis Journals methodology and obtains as a result that “the lower the Qualis, the greater the proportion of journals of the social and human sciences”19(687). In addition, it finds that the only two national journals on collective health that achieve high Qualis – not reaching the maximum – “have adopted a bias favorable to the scientific production of Epidemiology”19(683). The legitimacy of the search for specific evaluation criteria that are appropriate to the various intellectual traditions of science, abandoning unsustainable coexistence as the biomedical model of knowledge reproducibility, is defended by the author based on data such as the following:

[...] in 2009, among the 925 most prestigious scientific journals measured by the H Index, only 2% were classifiable as of public health or applied social sciences. None were from the human sciences (philosophy, sociology, political science or anthropology) [...]. The harsh reality is that, in 2009, the field of Medicine concentrated 60% of the 925 highly prestigious journals, followed by Physics, Chemistry, Biology and other natural sciences with 38%19(683).

In the same sense of making numbers an instrument, and not only object of criticism, members of the evaluation commissions at Capes present another proposal to change the criteria for evaluating scientific production: consider maximum levels, and not only minimums, for production indicators – note that this is already done in relation to the number of advisors that a teacher may have during the evaluation period1(2143).

From a sample of more than 700 researchers in graduate programs in public health, the authors demonstrate “the existence of inequalities in the amount of scientific production between the sub-areas that constitute Collective Health, especially with regard to the sub-area Epidemiology, that stands out compared to the others”1(2140), recommending
a damage reduction policy – based on the original – to reduce such inequalities.

**Final considerations**

Although 30 to 50 people participated in most of the activities developed by the Human Sciences Committee in scientific events, this number reaches more than 200 in just one of them, often not even half of its more than 50 members, including members and alternates, were present on them. The achievements narrated and quantified, therefore, had to live with challenges, among them:

We all know that Abrasco has publicly taken a position of opposition to the federal government since 2016, not only because of the statements by the then Minister of Health about the Unified Health System (SUS) – better saying, anti-SUS – but also because of the very stance of the political authorities that have sustained and still support such statements, basically discrediting historical achievements of social rights. This political position of our Association, with which we also agree, among other reasons for its coherence with democratic and participatory principles, resulted in a burden: the lack of collaboration from the Ministry of Health in promoting the latest events.

In addition to the lack of equity in the approach of the teaching-research-extension tripod in its agenda of events, the underfinancing was another challenge that was placed on the horizon of the Human Sciences Committee between 2017-2018. The achievements, on the other hand, concern the continuity and expansion of political and institutional development, occupying scientific events even outside collective health with their activities, promoting not only symposia but also national conversation circles and seminars.

In addition, the regional decentralization that has already guided the Human Sciences Committee since the management of the 2014-2016 triennium was also accentuated, since its coordination nucleus in January 2019 was formed by a representative from each of the five regions of the Country and their members represented higher education institutions in all of these regions, unlike the other Abrasco committees, although one represents a larger number of institutions – 36, and not just 29. The three committees of Abrasco are represented by agents who circulate through spaces of scientific, political and bureaucratic relations, commonly called the field of collective health according to an author who thus temporalizes them based on the congresses promoted by them:

While Epidemiology has been holding its congresses since 1990 – therefore, for 27 years (ten editions) – and Social Sciences in Health since 1995 (seven editions), the Policy, Planning and Management subfield only held three editions of its own congresses from 2010.

In this sense, it is important to note that, in the 1990s, the then Committee of Social Sciences in Health was composed of six members – including the coordinator – representing six institutions in two regions of the Country, Northeast and Southeast. This issue becomes fundamental when we address one of the Committee’s priorities, the evaluation of scientific production in the field of collective health, crossed by regional asymmetries and hierarchies, with some proposals presented and discussed in the activities developed by the Human Sciences Committee in scientific events promoted during the 2017-2019 administration pointing out other criteria to be assessed, qualitative, and not just quantitative. A kind of “identity dance” continues to go through the daily lives of CSHS researchers:

When placed in the field of Collective Health, the Social Sciences are seen as extremely theoretical and interpretative, bringing with them...
a tone of abstraction typical of purely theoretical reflections, although the recognition of the importance of these ‘abstractions’ for the constitution of the field of Collective Health is evident in Brazil. When placed in relation to the ‘traditional’ social sciences, the Social Sciences in Health are accused of being empirical, applied, and, for this reason, less scientific.

Thus, initiatives that point out priorities, achievements and challenges of the Human Sciences Committee through the records of public debates at scientific events can become a step in this dance, showing the political-institutional relations between CSHS, social sciences, human sciences and collective health, marked by research, evaluations and qualitative criteria.

Collaborator

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References


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