Brazilian Health Reform and the Single Health System: Dialogues with Concurrent Hypothesis

J Paim

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Objectives: To analyze the emergence of the development of health reform in a capitalist context, to describe the rationale and characteristics as well as discuss the challenges of their practice.

Methodology: Case study using documentary research.

Results: The author identifies four theoretical aspects of conceptual and methodological analysis of the practice of health reform in Brazil as a social and historical phenomenon: a) the partial reform, b) the overall reform, c) revolutionary political movements, and d) total social revolution. For the author, the survey of these aspects permits an overcoming of the vision of health reform as only a social movement sector, under this new perspective, it emerges as a proposal, a project and a process of social reform that converges bases of university, academic, medical and student movements and institutional projects. In this sense, the author presents ten hypotheses, formulated by social scientists and activists of the sanitary movement from practice experienced by each one of them. He clarifies that these assumptions are used as a methodological resource for thinking about democracy in health reform. These are:

1) The incorporation of health care demands is done through a set of legal and institutional arrangements, which set up different identities and social policies that prevent the subsequent development of a political struggle. 2) Health is the result of forms of social organization of production and everyday people’s struggles. 3) Democracy is a process of self and hetero-recognition of socio-political identities, which allows the recognition of workers as political subjects forged from their struggles. 4) The processes of health reform emerge from a context of democratization, which is associated to the needs of the masses, and socioeconomic medias. 5) The political nature of health reform is characterized by the democratic transition experienced by each national context. 6) The elements of health reform processes are fourfold: a) expansion of health awareness, b) construction of the analytical paradigm of social medicine and public health, c) organization of care practices: d) development a new professional ethic. 7) The democratic revolution is passive. 8) Health is a field that favors the construction of partisan alliances and poly classists. 9) Health reform creates institutional changes that are filtered by the State, and 10) Health reform is an unfinished process of social construction as explanatory hypotheses are true.

Conclusions: The author concludes that health reform in Brazil is a partial reform and eventually a lifestyle revolution. For the author, explanatory hypotheses have structural elements associated with a passive revolution which conditions the process of health reform.