

# Covid-19 National Pandemic Confrontation Plan: building a democratic health authority

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DOI: 10.1590/0103-11042020126001

**THE COVID-19 PANDEMIC SHOOK STRUCTURES**, showing civilizing challenges of great magnitude. The various disruptive dimensions of an unprecedented health, economic, social, cultural, environmental, ethical and political crisis exposed the failure of the ultra-liberal project with its agenda of deepening inequalities, withdrawing rights, destroying the State with profound impacts on life in its various manifestations.

In this context, Brazil is experiencing the pandemic in a spectacle of pride and abandonment by the federal government of its responsibilities. Instead of uniting the country to face the unprecedented situation of health crisis, the government opted for the intensification of conflicts between federated entities, between segments of society, emphasizing a discourse of discord and denialism. The communication strategy thus contributed to spreading confusion and preventing decisions to protect the life and health of the population.

The discourse of disqualification from mitigation measures recommended by the World Health Organization (OMS) – social distance, use of individual protection, case tracking, absence of a communication policy, disorganization of care – resulted in a situation of health catastrophe in the country with the death of almost 150 thousand people, many of them preventable, and with almost 5 million cases. The adoption of social protection measures, such as the emergency income of R \$ 600.00, was only made possible by the Legislative action.

Given this calamity, collective health entities, such as the Brazilian Center for Health Studies (Cebes), the Brazilian Association of Collective Health (Abrasco), the Brazilian Association Rede Unida (Rede Unida), the Brazilian Society of Bioethics (SBB), the National Health Council (CNS), joined the Brazilian Society for the Advancement of Science (SBPC), the National Association of Directors of Federal Higher Education Institutions (Andifes), the National Conference of Bishops of Brazil (CNBB), the Brazilian Press Association (ABI), the Brazilian Bar Association (OAB), constituting the Frente pela Vida (Front for Life), carrying out, on June 9, the Marcha pela Vida (March for Life), with the adhesion of more than 600 entities and the delivery of a manifesto in public hearing of several National Congress commissions attended by numerous parliamentarians. The Manifesto indicated strategic points, such as the defense of the Unified Health System (SUS) and the repeal of Constitutional Amendment No. 95 (from the spending ceiling), action in accordance with scientific evidence, protection of the environment,

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robust policies social protection and the uncompromising defense of Democracy.

As a result of the March for Life, the collective health entities that are part of the Frente pela Vida understood that it was their responsibility to interfere in the course of the pandemic by preparing a document based on science and social mobilization, Covid-19 National Pandemic Confrontation Plan<sup>1</sup>, from the perspective affirmation of a democratic health authority. The Plan was presented on July 3 in a virtual forum attended by numerous civil society entities, the National Council of Health Secretaries and parliamentarians.

The Plan is the result of participatory planning that recognizes the pandemic as a complex phenomenon that requires actions in several dimensions and in its interfaces with the contribution of scientific knowledge, technical knowledge, practices and social movement. It is not just a health problem, but all government sectors, as well as the various segments of society. It is important to note that the Coping Plan of Frente pela Vida, while presenting ways to control the pandemic, explains the centrality of the State in this process.

Reaffirms the responsibility of the federal government in formulating and conducting effective emergency policies to protect the Brazilian population from the various preventable effects of the pandemic and the Ministry of Health in coordinating intra and intersectoral actions with an impact on health, crucial in a characterized country for its continental dimension, with socio-cultural, economic and environmental diversities, in a historical context of deep social differences.

In opposition to its responsibility to face the pandemic, the federal government was silent and fed successive health crises, to the point of having, in the first three months of the pandemic, three ministers of health, the last being a general of the armed forces, remained as interim minister for about four months. Its possession occurred only recently, when the epidemiological parameters showed a situation of great lack of control in the transmission of the virus in the country, disproportionately distributed among the indigenous populations, poor, black and residents of the suburbs of major cities.

In a chronic situation of underfunding, SUS is unable to respond, in a timely and quality manner, to the demands for surveillance and health care generated by Covid-19, while fully addressing other population health problems, ensuring the safety of patients and health professionals.

The Coping Plan contains 70 recommendations, addressed to political and health authorities, SUS managers and society. Among them, health surveillance stands out as a priority to be conducted by trained teams from the network of Primary Health Care professionals, in conjunction with other health authorities. Measures aimed at implementing a line of care to Covid-19, linked to the Health Care Network, associated with the adoption of strategies to mitigate health and economic damage, complement the central actions to deal with the pandemic.

Unfortunately, we reached the month of October with the pandemic dragging on in the country in an epidemiological scenario of maintaining high incidence and mortality rates, despite the variability of these parameters between states and cities. Brazil is in a situation of continued health risk, in particular, for the vulnerable population, associated with the worsening of the economic crisis, with dramatic effects on the labor market. A situation that could have been avoided, considering the potential of SUS to provide effective responses to the health emergency caused by the Sars-CoV-2 virus.

To face the pandemic, another social project that overcomes the devastating agenda

of ultraneoliberalism responsible for the criminal de-financing of SUS is strategic. In this moment of crossroads, we reaffirm our historic commitment to Life, Health and Democracy.

Health is Democracy!

## Collaborators

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