
IEPS Annual Report 2024



IEPS
Instituto de Estudos
para Políticas de Saúde

IEPS Annual Report • 2024

Dialogue and scientific evidence for better public policies for Brazil's health system



IEPS
Instituto de Estudos
para Políticas de Saúde

About IEPS

We are a nonprofit, independent, and nonpartisan organization founded in 2019 with the purpose of contributing to the improvement of public health policies in Brazil. We advocate for the idea that all Brazilians should have access to quality healthcare and that the resources and regulations of the health system should be as effective as possible. Access to healthcare must respect the principle of equity, with the Brazilian state playing a key, distributive role in this process.

We believe that the best way to achieve our mission is through evidence-based public policies, designed, implemented, and monitored transparently and with the support of Brazilian society

Our work includes rigorous scientific research, political advocacy and public monitoring at the federal level (Executive and Legislative branches), and co-creation of efficient solutions in partnership with state and municipal governments to strengthen local health systems.



Our work is structured around three pillars:

1

Production of scientific research in health economics and public health, and initiatives to improve access to health data in Brazil

2

Development of joint initiatives with state and municipal governments to implement data-driven, evidence-based health policies

3

Influencing the design and implementation of public health policies to strengthen Brazil's Unified Health System (SUS)



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NAVIGATE THROUGH
THE PAGES USING
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In this document, all **highlighted texts** contain links. Click to view.

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Letter from the Founder and Chairman of the Board

It is with great motivation that I write the opening words of this fifth IEPS Annual Report. Reaching the five-year mark is a significant milestone. When we founded the Institute in 2019, aiming to contribute to the design and implementation of health policies in Brazil, we had no idea how far this journey would take us. Our work is still in its early stages, but the scale and impact of our early contributions show we are on the right path.

The original principle of ‘invest in knowledge before daring to give an opinion’ remains unshaken. We upheld it during the pandemic, which only reinforced our agenda, and we built and consolidated our core areas—research, public policy, and institutional relations. Through them, we provide the Brazilian health sector with studies, technical briefs, bulletins, and publications with significant national and international impact.\

This has been the case with the Agenda Mais SUS, a roadmap of diagnostics and recommendations for public health. It is also reflected in our work on mental health, inequality, racial equity, and the rights of children and adolescents.. Digital platforms like IEPS Data and FluxSUS have expanded access to public data. Partnerships with state and municipal governments have strengthened ties with public policies, especially through InovAPS, improving user registration and protocols for more efficient care delivery.

Notably, in 2024, the comprehensive study ‘The Private Sector and Public-Private Health Relations in Brazil: In Search of the Lost Assurance,’ developed in partnership with Umane, capped our first five years of work. Its nine chapters—spanning over 450 pages—explore critical issues in the private health sector and its relationship with the public system.

Looking back at the annual reports from the past four years, I believe they serve as an additional reference for those studying and implementing more effective and equitable health policies. Each report reflects the efforts of researchers, specialists, and professionals committed to understanding key challenges and proposing innovative solutions.

This is a collective effort, and so I repeat myself, as in previous years: thank you. Thank you to the entire team—diverse, committed, and talented. Thank you to our associate collaborators and visiting professionals. Thank you to our governing and fiscal boards.

These five years should not be viewed merely as a celebration. They mark the starting point for an even more challenging future that will demand an increasingly integrated and innovative vision from all of us. If Brazil was already facing difficulties in health, the pandemic exacerbated these vulnerabilities and revealed, with unprecedented clarity, the need for more robust and resilient public policies. It is a great source of pride to see how the IEPS community has contributed—technically, impartially, and constructively—to identifying problems and solutions, and served as a catalyst for dialogue.

This fifth Annual Report is the most recent snapshot of our journey so far, shared with full transparency. Let us move forward! I am fully confident that we can progress toward a fairer and more efficient healthcare system for the Brazilian population.

ARMINIO FRAGA

Founder and Chairman of the Board Institute for Health Policy Studies (IEPS)



Introduction

Over the past five years, we have consolidated our efforts to strengthen Brazil's health system, and in 2024, we celebrate our journey with a **strategic outlook toward the future**. We have defined our **priority agendas** and the **goals** we aim to achieve in the coming years, all grounded in our founding mission: **to contribute to the improvement of public health policies in Brazil**.

In 2024, we **established partnerships** with state governments and national and international organizations, achieved **decisive results** for the health system, and expanded both our teams and leadership. Our Board of Directors now includes the experienced surgeon **Paulo Chapchap**, who joined us with the mission of fostering a more **cross-functional organizational dynamic** and enhancing the **efficiency** of our project development and implementation.

This **institutional growth and consolidation** reflects — and responds to — the significant accomplishments delivered by the teams within our **Research, Public Policy, and Institutional Relations** departments over the past year. Through a broad and diverse scope of work, the **processes and outcomes achieved in 2024** enriched our dialogue with political actors, public managers, health professionals, and researchers, and **drove progress** across several fronts in the Brazilian health system.

We worked to ensure that **Primary Health Care** remained a priority during the **2024 Municipal Elections** and in the political agenda for 2025. We advocated for **greater transparency** in health-related parliamentary amendments, provided **technical support** for the redesign of the **Health Regions of Mato Grosso do Sul**, and published a **comprehensive study** on the private health sector and its relationship with the public system. These initiatives reflect the richness and dynamism of our teams and the understanding of Brazilian health as a **unique, broad, and complex system**.

With **satisfaction and transparency**, this report presents a comprehensive overview of the **dedicated and qualified work** carried out by the people at IEPS in pursuit of a **stronger health system** and **guaranteed access to quality health care** for all Brazilians.

We hope you find the reading insightful!



Photo: Rosa Rovena/Agência Brasil

IEPS Publications:

Scientific Evidence for Quality Public Policies

We believe that the best way to fulfill our mission is through **evidence-based public policies**. For this reason, **scientific production** is one of the core pillars of our work.

In 2024, we analyzed the **execution of parliamentary amendments in health**, the **impacts of racial inequalities on the health of the Black population in Brazil**, and **health indicators in capital cities**, among other key topics essential to understanding both the challenges and the potential of Brazil's health system.



3 FEATURED PUBLICATIONS

4 TECHNICAL NOTES

2 DISCUSSION PAPERS

5 IEPS BRIEFS

6 TOTAL PUBLICATIONS



Health Budget



TECHNICAL NOTE NO. 36

Exceeding the Minimum: The Role of Brazilian Capitals in Public Health Financing

[↗ access here](#)

TECHNICAL NOTE NO. 35

Parliamentary Amendments in Health: Where Are They Headed?

[↗ access here](#)

DISCUSSION PAPER NO. 20

Does Increasing Public Spending in Health Improve Health? Lessons from a Constitutional Reform in Brazil

[↗ access here](#)

IEPS BULLETIN NO. 8

Monitoring the Health Budget – Health Surveillance

[↗ access here](#)

Regionalization



TECHNICAL NOTE NO. 34

Analysis of Hospitalization Flows Between Health Regions

[↗ access here](#)

Primary Care



RADAR MAIS SUS BULLETIN NO. 1

The Provision of Public Health Services in Brazilian Capitals in 2023

[↗ access here](#)

IEPS DATA BULLETIN NO. 4

Health in the Capitals

[↗ access here](#)

HEALTH POLICY GUIDE VOL. 2

Tracking Risk Factors in Primary Care

[↗ access here](#)

AGENDA MAIS SUS

Agenda Mais SUS in Cities

[↗ access here](#)

HEALTH POLICY GUIDE – VOL. 1

Implementing Quality Improvement Systems in Primary Health Care

[↗ access here](#)



Racial Inequalities in Health



ÇARÊ-IEPS BULLETIN NO. 5
Hospitalizations and Mortality from Sickle Cell Disease by Race/Color (2012–2023)

[↗ access here](#)

ÇARÊ-IEPS BULLETIN NO. 4
Hospitalizations and Mortality from Assaults by Race/Color

[↗ access here](#)

Private Health in Brazil



FULL VOLUME
The Private Sector and Public-Private Health Relations in Brazil: In Search of the Lost Assurance

[↗ access here](#)

EXECUTIVE SUMMARY
The Private Sector and Public-Private Health Relations in Brazil: In Search of the Lost Assurance

[↗ access here](#)

Selected Publications

Articles authored by IEPS researchers published in high-impact academic journals in Brazil and internationally



THE LANCET *Regional Health Americas*

Transition towards cancer mortality predominance over cardiovascular disease mortality in Brazil, 2000–2019: a population-based study

Beatriz Rache, Rudi Rocha, Luciana Alves de Medeiros, Letícia Martins Okada, Gerson Ferrari, Hongmei Zeng, Alessandro Bigoni, Maria Paula Curado, Catarina M. Azeredo e Leandro F. M. Rezende

[↗ access here](#)



SAÚDE e SOCIEDADE

The field of studies on Black population health in Brazil: a systematic review of the last three decades

Rony Coelho and Gisele Campos

[↗ access here](#)

THE LANCET Global Health

Progress towards universal health coverage and inequalities in infant mortality: an analysis of 4.1 million births from 60 low-income and middle-income countries between 2000 and 2019

Thomas Hone, Judite Gonçalves, Paraskevi Seferidi, Rodrigo Moreno-Serra, Rudi Rocha, Indrani Gupta, Vinayak Bhardwaj, Taufik Hidayat, Chang Cai, Marc Suhrcke e Christopher Millett

[↗ access here](#)



More doctors, better health? Consolidating evidence from Brazil's Mais Médicos program

Rudi Rocha

[↗ access here](#)



Improvements in data completeness in health information systems reveal racial inequalities: longitudinal national data from hospital admissions in Brazil 2010–2022

Rony Coelho, Rudi Rocha e Thomas Hone

[↗ access here](#)



Medical division, New IEPS Division Led by Paulo Chapchap

Surgeon Paulo Chapchap, who was a member of the IEPS Advisory Board, took on the role of Medical Director in March 2024. This new division was created to bring clinical expertise into the executive team and foster more cross-cutting organizational dynamics

PAULO CHAPCHAP

IEPS Medical Director

“The institute has been doing highly consistent work, and this new chapter for me at the organization is a step toward building a more integrated structure. The goal is to enhance performance and strengthen IEPS’s mission of improving the health system and ensuring better conditions for SUS functionality and access.”



Research division

**Technical Knowledge,
Data Democratization, and
Internationalization**



Photo: Giovanni Della Ripa



Private Health in Brazil

Despite the size of Brazil's private health-care sector and the relevance of its interactions with the public sector, the country has yet to consolidate a tradition of research on supplementary health. Strengthening scientific production is a key step in addressing the sector's challenges and bottlenecks, which affect the entire Brazilian healthcare system and the right to health for thousands of Brazilians.

The project “**Supplementary Health in Brazil**”, developed in partnership with **Umane** since 2023, was designed to contribute scientific analyses and evidence to improve the quality of the public

debate and support progress toward a better organization of health insurance mechanisms in Brazilian society.

In 2024, the project culminated in the publication of the study ***The Private Sector and Public-Private Relations in Health in Brazil: In Search of the Lost Assurance***, which offers an unprecedented and in-depth overview of supplementary health in the country. The research was conducted over the course of a year and included discussion workshops, analysis of dozens of datasets, and interviews with key stakeholders in the supplementary health sector.



Arminio Fraga, Ricardo Leonardos, and Rudi Rocha at the opening panel of the launch event for the study “The Private Sector and Public-Private Relations in Health in Brazil: In Search of the Lost Assurance”, held at the Center for Public Policy Debate (CDPP) in São Paulo. Photo: Giovanni Della Ripa.

**RUDI ROCHA**

Research Director at IEPS
and coordinator of the study

“This research is the result of a collective effort that brought together many people, all with the shared goal of contributing to the debate on Brazil’s healthcare system. The launch event was a milestone in this process of strengthening the discussion so that it can continue to grow—and help us understand where healthcare in Brazil is headed in the coming years.”

The launch took place in October at the auditorium of the **Center for Public Policy Debate (CDPP)** in São Paulo, during an event attended by more than 70 people, including academics, journalists, and representatives from public and private health institutions. In addition to the presentation of the research, the event featured three discussion panels with experts and guests, who debated the current state of the sector and future prospects.

The research, divided into two parts, brings together nine studies on key aspects of the private healthcare sector, including an overview of supplementary health in Brazil, the role of philanthropic hospitals and “santas casas” (charitable hospitals), the impact of Social Health Organizations (OSS) on the management of public health services, among other important topics. Each study presents its own findings and messages, and together, they offer over 450 pages of statistical descriptions, evidence-based analyses, qualitative research, and recommendations.



After its launch, the study was presented at the **2024 National Congress of Private Hospitals (CONAHP)** and at the **46th Meeting of the Brazilian Econometric Society**, the country's leading economics conference. At the latter, we coordinated the special session "*Private Health and Public-Private Relations in Brazil*," which featured paper presentations by researchers from **IEPS**, **Inspser**, and the **Católica Lisbon School of Business & Economics (CLSBE)**.



From left to right: Vinícius Peçanha, Helena Arruda, and Leonardo Rosa, researchers at IEPS; Karen Codazzi, IEPS doctoral fellow; Máira Coube, researcher at Inspser; and Matheus Dias, professor at CLSBE, during the 46th EBE. Photo: Courtesy of IEPS.



Project Publications



FULL REPORT

Multiple
authors

[↗ access here](#)



EXECUTIVE SUMMARY

Rudi Rocha

[↗ access here](#)

PART 1 The Private Sector



Rudi Rocha (IEPS)
Helena Arruda (IEPS)
Leonardo Rosa (IEPS)
Matías Mrejen (UFF)

[↗ access here](#)



Gustavo Cordeiro (IEPS)

[↗ access here](#)



Marcella Semente (IEPS)
Victor Nobre (IEPS)

[↗ access here](#)



Gustavo Cordeiro (IEPS)
Karen Codazzi (IEPS)

[↗ access here](#)



PART 2 **Public-Private Relations**



Karen Codazzi (IEPS)

[↗ access here](#)



*Ana Maria Malik (FGV)
Cinthia Costa (BP)*

[↗ access here](#)



Leonardo Rosa (IEPS)

[↗ access here](#)



*Maira Coube (FGV EAESP)
Alexandre Rabelo (IEPS)
Rudi Rocha
(FGV EAESP and IEPS)*

[↗ access here](#)



Luiz Felipe Fontes (Inspier)

[↗ access here](#)



FOLHA DE S. PAULO

DESDE 1921 ★★ UM JORNAL A SERVIÇO DO BRASIL

ANO 103 * Nº 34.620

SEGUNDA-FEIRA, 15 DE JANEIRO DE 2024

R\$ 6,90

Mortalidade infantil sobe com troca de prefeito, diz estudo

A mortalidade infantil aumenta em média 6,7% no período de transição de governo municipal quando há troca de gestão, aponta pesquisa do IEPS (Instituto de Estudos para Políticas de Saúde). O estudo concluiu que há efeitos negativos na prestação de serviços de saúde, como consultas, após o desfecho das eleições — mais especificamente, ao longo do período de transição e nos primeiros dois anos do novo governo. **Política A9**

Mortalidade infantil sobe com troca de prefeito, diz estudo

A mortalidade infantil aumenta em média 6,7% no período de transição de governo municipal quando há troca de gestão, aponta pesquisa do IEPS (Instituto de Estudos para Políticas de Saúde), que analisou anos eleitorais de 2008 a 2020.

O estudo concluiu que há efeitos negativos na prestação de serviços de saúde, como consultas, após o desfecho das eleições — mais especificamente, ao longo do período de transição e nos primeiros dois anos do novo governo. **Política A9**



Geni Núñez, 32, doutora pela UFSC e autora de dois livros. **Arte: Karine Kawanishi/Artepress**

4,8% dos presos não retornam depois de saída temporária

Levantamento abrange 18 unidades federativas; projeto para eliminar benefício ganhou impulso com morte de PM

Levantamento feito pela Folha aponta que 56.924 presos obtiveram direito à saída temporária no último Natal em 18 unidades da Federação. Desse total, 2.741, ou 4,8%, não retornaram às instituições prisionais. Em oito estados, o benefício de fim de caso a caso pelas Varas de Execução Penal, não foi concedido, e a Itália não forneceu os dados pedidos.

O estado onde parcela maior de detentos deixou de voltar ao sistema foi o Rio de Janeiro (4%), que enfrenta problemas na segurança, seguido por Pará (12%) e Ceará (9%). São Paulo liderou a quantidade de beneficiados, com 34.547, dos quais 1.566 (4,5%) não retornaram. No país, pelo menos 151 (5,5%) dos que não regressaram foram recapturados.

A saída temporária é concedida a presos do regime semiaberto, sob condições como o cumprimento de um período mínimo da pena. O tema mobilizou setores da política após a morte de um policial militar baleado por um preso libertado durante perseguição em Belo Horizonte. Projeto de lei para eliminar o benefício tramita no Senado. **Cotidiano B1**

Political Economy and Health

One of the studies developed within this research line analyzes the impact of government transitions at the municipal level on population health indicators. In 2024, we published the article **“Political Turnover and Fatal Government Transitions,”** authored by **Rudi Rocha**, Research Director at IEPS, and **Helena Arruda**, IEPS researcher. The study found, among other conclusions, that **infant mortality rates increase by an average of 6.7% when the second trimester of pregnancy coincides with periods of municipal government transition following tightly contested elections.** The article was originally published in

English as [Discussion Paper No. 19](#) and was also released in a summarized and translated version as [Technical Note No. 33](#), in January 2024.

The research served as the basis for a [cover story published](#) exclusively by **Folha de S. Paulo** and widely discussed in the Brazilian media. In addition, it informed the **first recommendation of the “More SUS in Cities Agenda”**, an initiative led by the Institutional Relations Directorate for the 2024 Municipal Elections, which highlighted, among other actions, the need to assess municipalities’ installed capacity to improve access to and infrastructure for Primary Care.

[➤ READ THE FULL ARTICLE ONLINE](#)



Health Management and Organization

Within this line of research, three studies are currently under development. One of them focuses on the **Saúde na Hora** program, launched in 2019 by Brazil's Ministry of Health. The objective is to conduct a detailed analysis of the program, mapping its costs and potential outcomes in healthcare delivery. In 2024, the research team entered the final stage of preparing an academic article with the study's initial findings for submission to an international journal.

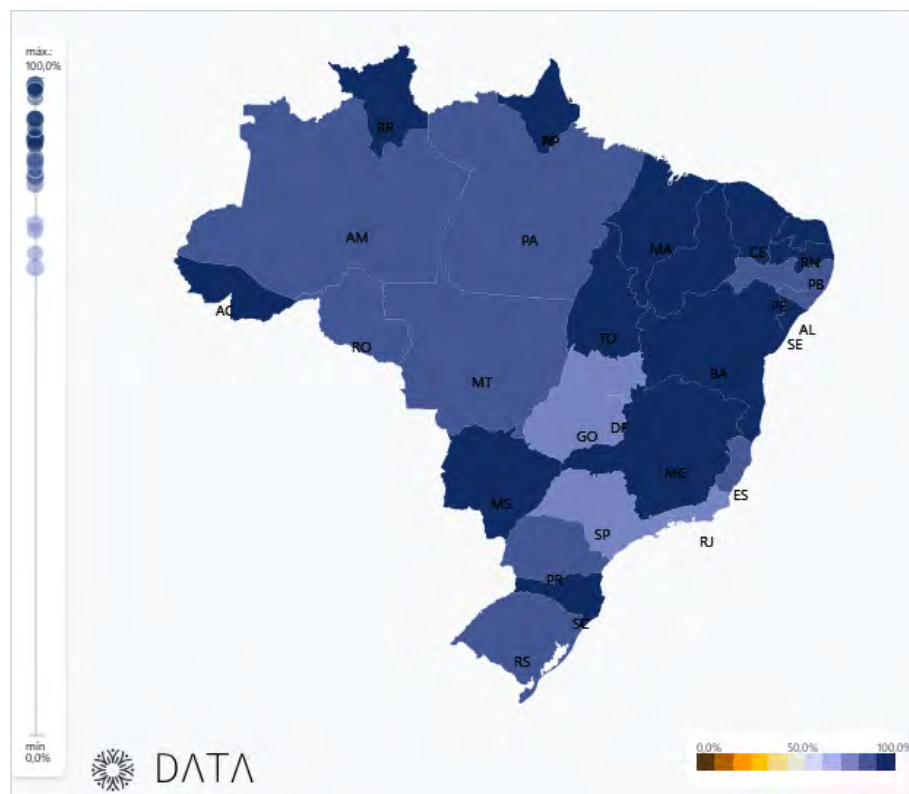
Another ongoing study analyzes the adoption of **transparency measures for waitlists in the SUS** (Brazil's Unified Health System) in the state of **Santa Catarina**, which—according to preliminary results—may have triggered a series of organizational changes within the SUS, resulting in increased healthcare service delivery.

The investigation into the **impacts of the national nursing wage floor on the health workforce** is also part of this research line and, in 2024, was in the data organization and analysis phase.

IEPS Data

Designed to democratize access to Brazilian health data, **IEPS Data** received significant updates in 2024. The platform began offering data from **2022 and 2023**, along with a new data visualization feature: **“Map + Ranking (State)”**. This view allows users to access a map of Brazil displaying health indicator data for each **Federative Unit**.

The team behind IEPS Data also conducted workshops during the **2nd Estadão Health Journalism Course**, an initiative by the *Estadão* newspaper aimed at undergraduate journalism students and recent graduates.



[➤ EXPLORE IEPS DATA](#)



IEPS Data Bulletin

The team responsible for **IEPS Data** continued developing research projects initiated in 2023 and, in October, published **IEPS Data Bulletin No. 4**, which presents an analysis of primary care, mortality and morbidity data, and health expen-

ditures across Brazil's 27 state capitals. The study drew on the **Local Health Overview**, one of the visualizations available on IEPS Data that provides a summarized view of health indicators for all Brazilian municipalities.



FluxSUS: Regionalization Panel

FluxSUS, an initiative featured in the **IEPS Data Project Gallery**, is a platform designed to support analyses of the regionalization process within Brazil's public health system. It draws on data from patient flows between municipalities, as recorded in the SUS Hospital and Ambulatory Information Systems (SIH/SUS and SIA/SUS).

The platform was recently updated with 2023 data, new visualizations by level of care complexity, and information on key ambulatory procedures. In July 2024, **Technical Note No. 34** presented an analysis developed using insights from the platform.

↔ FluxSUS ↔

Um olhar sobre a movimentação dos usuários do SUS no sistema hospitalar e ambulatorial

Home Fluxos Retenção Dependência Algoritmo Metodologia Sobre

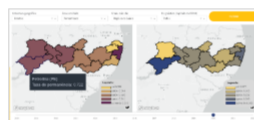
FluxSUS é uma plataforma que permite análises interativas sobre o fluxo de usuários dos serviços hospitalares e ambulatoriais do SUS.



Como os pacientes se movimentam entre municípios e regiões de saúde na busca pelos serviços de saúde?

Aqui você pode analisar para onde vão os pacientes que saem do seu município para buscar os serviços hospitalares e ambulatoriais.

Ver seção 'Fluxos'



Quais são as taxas de retenção e de atração das regiões de saúde?

Aqui você encontra a proporção de pacientes que são retidos e a proporção de pacientes que são atraídos de outros locais para cada Estado, Grande Região, Macrorregião e Região de Saúde.

Ver seção 'Retenção'



Para onde os pacientes vão para buscar serviços hospitalares e ambulatoriais?

Aqui você encontra os destinos de todas as movimentações de pacientes do serviço hospitalar e ambulatorial, o quanto eles dependem de outras regiões.

Ver seção 'Dependência'



Como seriam as regiões de saúde se considerarmos apenas o fluxo dos pacientes?

Aqui mostramos como seriam as regiões e macrorregiões de saúde se estivessem baseadas somente na movimentação de pacientes de serviços hospitalares e ambulatoriais.

Ver seção 'Algoritmo'



Çarê-IEPS Chair

Throughout 2024, researchers from the **Çarê-IEPS Chair**—an initiative dedicated to producing high-quality research and data on the health of Brazil’s Black population—actively engaged in activities led by the Ministry of Health’s Office for Racial Equity. Their participation included contributions to key spaces for dialogue and policymaking on Black population health.

Highlights include their involvement in the reopening of the **National Committee on the Health of the Black Population**, as well as in the seminar *Observatory on Black Population Health: Perspectives for a Collective Construction*, where they contributed to discussions on guidelines and strategies to strengthen

the effectiveness of the **National Policy for Comprehensive Health of the Black Population (PNSIPN)**.



Photo: ENSP/Courtesy



Rony Coelho, then a member of the Çarê-IEPS Chair, during a presentation on the first day of the seminar. Photo: Courtesy of the Ministry of Health.

[➤ LEARN MORE ABOUT THE PROJECT](#)



In March, Çarê-IEPS also took part in the [1st Virtual Plenary on Black Population Health](#), organized by the São Paulo Forum on Black Population Health. Additionally, the initiative contributed to the development of the **Survey for Diagnosing the Implementation of the National Policy for the Health of the Black Population at the Municipal Level**, launched in July by the Health and Environmental Surveillance Secretariat (SVSA/MS) and the Sergio Arouca National School of Public Health (ENSP/Fiocruz).

In August, the Chair published [Çarê-IEPS Bulletin No. 5/2024](#), which analyzes hospitalization and mortality from Sickle Cell Disease by race/color, highlighting significant disparities in health access and elevated mortality rates among Black Brazilians. The bulletin shows how disaggregated racial data exposes systemic inequalities and can inform public policies for vulnerable populations.



Researchers from the Çarê-IEPS Chair contributed a chapter to the book *Numbers of Racial Discrimination: Human Development, Equity, and Public Policy*, published by Jandaíra. The volume was organized and co-authored by Michael França and Alysson Portella, coordinator and researcher, respectively, at the Insuper Center for Racial Studies. The book received the **Jabuti Academic Award** in the Economics category.

Cover of the book **Numbers of Racial Discrimination**, illustrated by Mayara Smith. Published by Jandaíra, 2023.



International Partnerships



Health Financing for Universal Health Care in Challenging Times (HFACT): Leaving No-one Behind

In 2024, we entered the second year of the project *Health Financing for Universal Health Care in Challenging Times (HFACT): Leaving No-one Behind*—a partnership between IEPS and the University of York, funded by the UK's National Institute for Health Research (NIHR).

Published in 2023, [Discussion Paper No. 18](#), which analyzes Brazil's *Mais Médicos* (More Doctors) Program, was presented in July at the **EuHEA Conference 2024**, a biennial health economics conference held in Vienna, Austria.



Other research conducted within the HFACT framework includes studies on racial inequalities in access to health-care and the impact of macroeconomic fluctuations on subnational fiscal space for health in Brazil. This latter study was presented in November at the [8th Global Symposium on Health Systems Research](#), held in Nagasaki, Japan.

[↗ LEARN MORE ABOUT THE PROJECT](#)



Health System Fragmentation

The project *Health System Fragmentation and Universal Health Coverage in Brazil, Colombia, Mexico, and India (2022–2026)* is a multi-country research initiative examining how fragmented health financing systems affect progress toward access, quality, and equity in universal health coverage. Focusing on four highly unequal countries, the study aims to generate evidence on the causes, consequences, and possible solutions to fragmentation, with active participation from governments, academic institutions, and local communities. The ultimate goal is to strengthen health systems and improve the well-being of vulnerable populations.

In 2024, the project advanced the development of two academic papers: one on health system regionalization in Brazil and another evaluating the *Cuidar Melhor* program—an initiative of the state government of Ceará that received sup-

port from IEPS and Umame in 2022.

In May, findings from the evaluation of *Cuidar Melhor*—which highlighted the need for a program redesign—were presented to teams from the Ceará State Health Secretariat (SESA/CE) and the Ceará Institute for Research and Economic Strategy (IPECE), during meetings held in Fortaleza. Building on these findings, the next phase of research will adopt a qualitative approach, including interviews with state and municipal health officials, to explore implementation challenges and decision-making dynamics.

Preliminary results from both studies were presented by IEPS researcher **Frederica Padilha** in November at the [5th Brazilian Congress on Health Policy, Planning, and Management](#) hosted by ABRASCO, also in Fortaleza.



Digital Health Exemplars

The *Digital Health Exemplars* project is the result of a partnership between IEPS and Johns Hopkins University, through the Center for Global Digital Health Innovation (CGDHI). Launched in 2023, this collaboration strengthens IEPS's focus on digital health and its efforts to monitor and analyze Brazil's national digital health strategy. The project brings together researchers from IEPS's research and public policy teams under the **TechSUS** program.

This comparative research project investigates mechanisms that have driven successful digital health expansion across different countries. It focuses on case studies from Ghana, Rwanda, Finland, India, and Brazil, exploring how governance models, digital infrastructure, and implementation strategies influence primary health care delivery. The research methodology combines document analysis, quantitative data, and qualitative interviews.

ANALYZING BRAZIL'S DIGITAL HEALTH LANDSCAPE

IEPS is responsible for the analysis of the Brazilian case. In 2024, our team studied the governance model that enabled recent advances in SUS digitalization, the effects of electronic medical records on primary care delivery, and the development of telehealth initiatives across the country.

In April, IEPS hosted a **workshop** with representatives from civil society, the public and private health sectors, and academia. The session helped guide the research design by identifying areas of consensus and divergence regarding high-impact digital health initiatives, while also informing the study's priority themes.

Following the workshop, the research team began data collection, drawing on public health information databases and conducting interviews with representatives from the **National Council of State Health Secretaries (Conass)**, the **National Council of Municipal Health Secretariats (Conasems)**, the **Ministry of Health**, and state-level telehealth centers. The interviews explored topics such as digital health, electronic medical records, telemedicine, and the use of text messaging to support health communication.



IEPS researchers and invited experts during the digital health workshop held in early April at the IEPS office in São Paulo. Photo: IEPS



Urban Violence and Its Impact on the Health System in Rio de Janeiro

Violence is a constant presence in the daily lives of thousands of residents in the city of Rio de Janeiro. The research developed under the project *Urban Violence and Its Impact on the Health System in Rio de Janeiro* analyzes how this context affects key health indicators—particularly access, service utilization, and quality of care.

In 2024, the project's findings were presented at the **EuHEA Conference 2024** in Vienna, through the paper titled *The Impacts of Urban Violence on Primary Health Care in Poor Neighborhoods: Panel Data Evidence from Rio de Janeiro*. The study found that police operations reduce the number of primary care procedures performed in the city by 12.3%. The article was authored by **Vinicius Peçanha**, IEPS researcher; **Julia Guerra**, IEPS PhD fellow; **Rudi Rocha**, IEPS Director of Research; and **Christopher Millett** and **Thomas Hone**, researchers from Imperial College London.

In December, the study was awarded the **2024 Imds-SBE Prize**, presented by the Brazilian Econometrics Society (SBE) and the Institute for Mobility and Social Development (Imds). The announcement took place during the [46th Brazilian Meeting of Econometrics](#), held in Natal, in the state of Rio Grande do Norte.

Another publication from the project in 2024 was the article *"The Effects of Reducing Violence on Health Access: Evidence from the Pacifying Police Units Program in Poor Neighborhoods of Rio de*



From left to right: Paulo Tafner, President of Imds; Humberto Moreira, Professor at FGV/EPGE; Vinicius Peçanha, IEPS Researcher; and José Heleno Faro, Professor at Insper. Photo: Courtesy of SBE

Janeiro." This study examined whether the presence of Pacifying Police Units (UPPs) is associated with increased availability of health services.

Preliminary findings indicate that the UPP policy significantly increased the number of health procedures performed in clinics located near pacified areas, highlighting how improved security can reduce barriers to accessing health services. These results shed light on the broader implications of violence reduction for public service utilization and underscore the need for integrated policies to address the social determinants of health in vulnerable communities



Public Policy division

**Dialogue, Technical
Expertise, and Co-creation
of Innovative Solutions to
Strengthen SUS**



Photo: Mario-Salvador/Difere Studio



Redes Program – Regionalization, Development, and Health

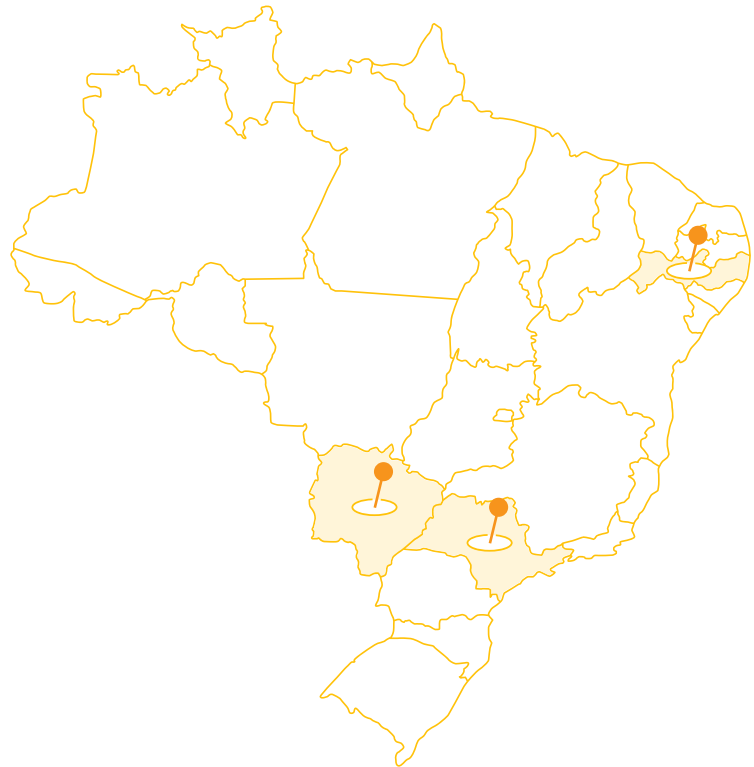


REDES

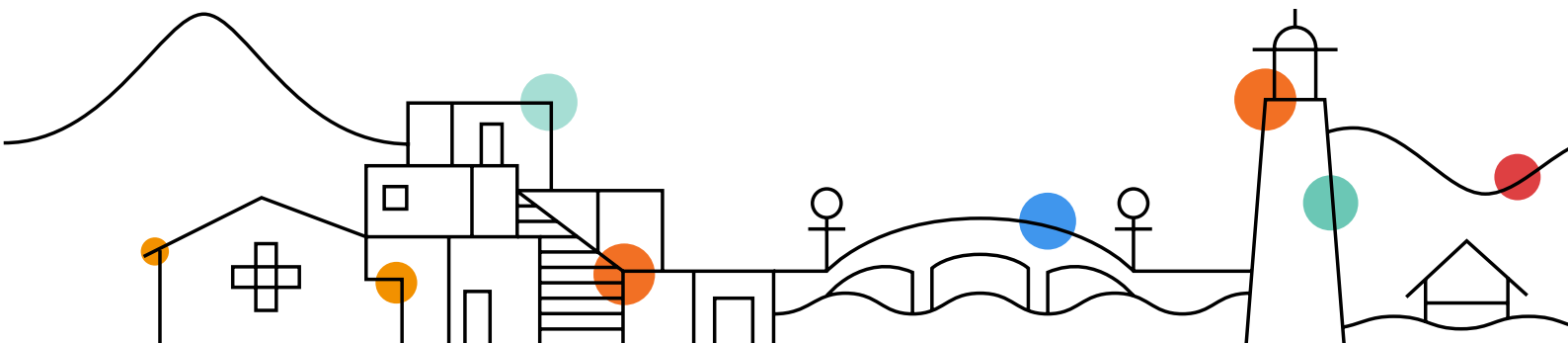
Regionalização,
Desenvolvimento
e Saúde

Regionalization is a core organizing principle of Brazil's Unified Health System (SUS), designed to structure health actions and services across the national territory in a hierarchical and integrated manner, in order to reduce barriers to access. Defining the most effective models and dynamics for regionalization is a complex task—it involves multiple stakeholders across different levels of government, requires strategic allocation of resources, and demands a careful analysis of local needs.

Through the *Redes* Program and technical cooperation agreements with Brazilian states, we provide technical support to ensure that regionalization processes are implemented appropriately. This work is guided by a proprietary methodology and carried out in close dialogue with state and municipal health secretariats. The result is a co-creation process that supports the design, negotiation, and formal adoption of new regulatory frameworks to strengthen inter-governmental cooperation and regional integration in health.



Umane has been our partner since 2023, and in 2024, the **Lemann Foundation** joined the initiative to support the expansion of the project, which began in the state of São Paulo and has since extended to **Mato Grosso do Sul** and **Pernambuco**.





Strategic Pillars of the Redes Program

The *Redes* Program focuses on strengthening three strategic dimensions essential to enabling states to effectively lead regional health networks. We believe that to overcome political and admin-

istrative challenges, state governments must build a foundation based on **strong governance, incentive-based financing, and an effective bureaucracy.**



STRONG GOVERNANCE
Establish and maintain regional governance forums as legitimate and empowered spaces for political negotiation and decision-making.



INCENTIVE-BASED FINANCING
Promote investments aligned with population needs, while creating financial mechanisms that guide and support municipal-level actions.

EFFECTIVE BUREAUCRACY
Strengthen regional administrative capacity by developing competent and effective bureaucracies capable of implementing care strategies at the regional level.

Redes in São Paulo



Technical Support for the State Health Regionalization Project

The state of São Paulo was the first to receive technical support from the *Redes* Program. Just over a year after the partnership was formalized, the joint effort yielded significant contributions to the state's Health Regionalization Project—

an initiative led by the São Paulo State Health Secretariat (SES/SP), in collaboration with the Council of Municipal Health Secretaries (COSEMS-SP) and supported by the Pan American Health Organization (PAHO).



Members of São Paulo's Tripartite Regionalization Steering Group and specialists in regionalization during a meeting to review and discuss the report outlining strategic guidelines for integrating and strengthening health care networks under the SUS in São Paulo. Photo: Courtesy of IEPS.

The contributions were structured around seven key guidelines, grounded in the strategic pillars of the *Redes* Program. These were consolidated in a technical report developed through a series of co-creation, validation, and consensus-building meetings with state health

officials. The report also incorporated historical analysis of regionalization in Brazil and findings from IEPS-led research. To ensure technical rigor and policy relevance, the report was reviewed by a panel of experts specializing in health system regionalization.



Forums Showcasing Successful Experiences in Building Regional Health Care Networks

The *Redes* team supported both editions of the **Forum on Successful Experiences in Building Regional Health Care Networks**. During the [first edition](#), held in May 2024, **Rudi Rocha**, IEPS Director of Research, participated in the opening session, while **Renato Tasca**, public health physician and Senior Consultant

at IEPS, moderated the thematic panel on **Regional Governance**.

At the [second edition](#) of the Forum, in addition to IEPS's participation in the opening session, the **proposed Regional Health Policy for the State of São Paulo** was formally presented.



The knowledge generated through the implementation of *Redes* in São Paulo was also shared during a public [event](#) co-hosted by the **Government of the State of São Paulo** and the **Legislative Assembly of the State of São Paulo (Alesp)**. At the event, **Arthur Aguilar**, IEPS Director of Public Policy, presented key findings and data produced through the program.

[↗ watch here](#)

Rudi Rocha during the opening session.
Photo: Mario Salvador/Difere Studio



Renato Tasca moderating the thematic panel on Regional Governance.
Photo: Mario Salvador/Difere Studio



Redes in Mato Grosso do Sul

The *Redes* Program was launched in **Mato Grosso do Sul** in **August 2024** and, within just a few months, **supported the development** of a **Regionalization Master Plan**. The document redefined the organization of the state's health regions with the goal of reducing interregional dependencies and promoting regional integration to expand access to care.

The technical support began with the development of an unprecedented **technical brief** that introduced a proprietary methodology to classify the state's health regions, using a panel of **32 indicators** grouped by thematic areas. Each indicator was standardized, normalized, and assigned a specific weight based on its relevance for regional assessment.

Based on this analysis, the team proposed a new territorial arrangement that redefined groupings of municipalities and health regions to ensure greater coherence and responsiveness. This proposal was incorporated into the state's **Regional Development Plans (PDRs)** and formally approved by the **State Bipartite Inter-Management Commission (CIB)**—marking a major milestone in the regionalization process in Mato Grosso do Sul.



“The method enabled a dynamic and continuous assessment of the territory's health conditions over time. While the use of standardized scoring may simplify certain nuances and local challenges, it can serve as an important tool to support flexible, evidence-based decision-making by health managers.”



AGATHA ELEONE

Public Policy Analyst
at IEPS



Signing of the technical cooperation agreement between IEPS, Umane, the Lemann Foundation, and the Government of Mato Grosso do Sul. From left to right: Crhistinne Maymone (Deputy Secretary of Health, MS), Maurício Simões (Secretary of Health, MS), Eduardo Riedel (Governor of MS), Arthur Aguilar (Director of Public Policy, IEPS), Evelyn Santos (Partnerships and New Projects Manager, Umane), and Janiele de Paula (Leadership Impact Manager, Lemann Foundation). Photo: Saul Schramm/SES-MS

Another key stage of the process involved a series of **workshops to map patient access flows** within the state's main health care networks. Additionally, a joint methodology was developed—through collaboration with state and municipal health officials and representatives from the Ministry of Health—to define the **Guidelines, Objectives, Targets, and Indicators (DOMI)** of the **Integrated Regional Planning (PRI)** framework.

The PRI is a core macro-regional planning tool that aligns local needs, available resources, and intergovernmental agreements to promote equity, access, and sustainability in Brazil's Unified Health System (SUS). This participatory

process took place between August and November 2024 and followed a **five-step method**.

The process leading to the PRI's approval by the CIB involved approximately **90 state and municipal health managers**. As a result, **macro-regional health plans** were developed, based on the DOMI framework and formally approved by the CIB—consolidating both regional planning and governance.

The methodology developed by the *Redes* team proved effective, replicable, and aligned with the core principles of the SUS, establishing a reference model for other states seeking to strengthen their regional governance.



Step 1

Develop common guidelines and Objective Key Results (OKRs) for each macro-region

Step 2

Refine OKRs to ensure their specificity, measurability, attainability, relevance, and timeliness

Step 3

Systematize and ensure clarity and textual accuracy of the DOMIs

Step 4

Conduct a technical consultation for joint deliberation

Step 5

Integrate the DOMIs into the PRI of each macro-region

Five-step method applied in Mato Grosso do Sul to develop the DOMI framework for Integrated Regional Planning (PRI).



Teams from SES-MS and IEPS during one of the five DOMI planning workshops, August 2024. Photo: Courtesy of IEPS

Qualifica Atenção Básica

We have reached the third year of **Qualifica Atenção Básica**, a partnership with the **Recife City Government**, supported by **Umane**, which has become a success story and aims to pave the way for the project's expansion into new regions.

In 2024, **Instituto Devive** and **Fundação Maria Emília**, two new funders, joined us to support the expansion of **Recife Monitora**, one of the project's key components, to other municipalities starting in 2025.





Recife Monitora

A quality system to support results-based management at the care delivery level

Recife Monitora has already been implemented throughout the city's public health network and, by 2024, had completed **six evaluation cycles**. Since its launch, the number of health teams rated in the “**quality zone**” increased from **10 to 29**, while those in the “**critical zone**” decreased from **56 to 25**.

This year was marked by the **consolidation of knowledge** acquired in the project's initial years and by its **dissemination** through guides, manuals, short courses, and mentorship programs.

In 2024, we accomplished the following:

- The production of **two Management Training Manuals** to support the work of **Family Health Unit (USF) coordinators** and **Primary Care coordinators** from each of Recife's health districts. The manuals provide guidance on conducting structured feedback sessions and developing quality improvement plans using the **Recife Monitora** platform.
- The short course “**Building Quality in Practice: A Focus on Recife Monitora**”, held in four sessions and attended by **151 USF coordinators** from Recife, aimed at promoting quality-focused planning in primary care.
- The course activities evolved into a **practical mentorship program** for coordinators of **USF+ (Family Health Unit Plus)** — a new model of **Basic Health Units (UBS)** launched in Recife in 2024. With extended operating hours, USF+ seeks to expand access to healthcare. The mentorship sessions deepened discussions and supported coordinators in responding to the challenges encountered during implementation.
- The coordination of an **immersion program** for central and district-level managers in Recife's health system, which trained **57 mentorship multipliers**. These participants were equipped with tools and techniques to plan, execute, and monitor improvement actions, thereby enhancing team responsiveness to challenges identified by the Monitora system.



Immersion with managers from the central and district levels of Recife's public health network Photo: Courtesy of IEPS.

A **direct outcome of the Immersion on Quality in Primary Care**, one of the main legacies of 2024 was the creation and dissemination of a **structured mechanism for developing action plans**.

Collectively developed with the **USF+ teams** during the mentorship program, the method combined tools to **identify**

obstacles, define guidelines, and plan actions with clear goals and timelines. This approach was replicated across Recife's entire **Primary Health Care network**, strengthening **problem-oriented management** and resulting in the collaborative development of **dozens of action plans** during the first activity cycle.



The experience built over the past years was consolidated in the **first edition of the Health Policy Guide**, which provides **comprehensive guidance** for managers seeking to design and implement **Quality Systems in Primary Health Care (PHC)**. The guide also targets **public health professionals, academics, and health organizations** interested in the topic.

[↗ Read here](#)





Recife Experimenta

Care and management innovations co-created with the network that, if proven effective, are systematized and scaled across the municipality's entire primary health care service.



In 2024, the [Practical Guide “People at the Center: Facilitating Access, Reception, and Work Processes”](#), developed by IEPS and published in 2023 by the **City of Recife** as an official municipal guideline, began to be used by health authorities to improve work processes across the city's health network, which currently includes **370 Family Health teams**.



Recife Reconhece

Integrated Exhibition of Good Practices in Health



In 2024, after two editions, **Recife Reconhece** became part of the **Seminar on Successful Experiences** organized by the **Recife Municipal Health Department**, expanding the initiative to include other levels of health care.

Community health worker in Recife.
Photo: Andrea Rego Barros/PCR.



A Year of Recognition for Qualifica Atenção Básica

In addition to the progress made in its implementation and integration into the daily routine of Recife's health network, **Qualifica Atenção Básica** reached its third year with growing recognition from public management authorities.

- The project was honored at the **1st Seminar on Inspiring Experiences – Building Recife's Effective Health Network**, under the **Health Innovation and Management** theme.
- **Recife Monitora** received recognition at the **6th "Pernambuco Aqui Tem SUS" Showcase**, part of the **14th COSEMS-PE Congress**.
- It was also **awarded** the **National CONASEMS Prize "Brasil, Aqui Tem SUS"**, in **Category 1**, which evaluates local health teams and management practices across municipalities and the Federal District.

"It was an honor to represent this collective effort, developed with such care. The pursuit of quality in Primary Health Care in Recife is our daily mission. This recognition shows us we are on the right path and serves as an inspiration for other municipalities seeking to strengthen the family health strategy and the SUS."

Debora Amaral,
General Manager of
Integrated Actions in the
Territory, Recife Municipal
Health Department

Cuida Pernambuco Program



At the end of 2023, we established a partnership with the **Government of Pernambuco** to support the development of **Cuida Pernambuco**, a state-level strategy aimed at **reducing waiting lists in the SUS** for exams, consultations, and elective surgeries, as well as **improving hospital and outpatient care regulation**.

Our support is structured around **two**

key areas of work:

- **Optimizing care regulation flows**, as an immediate solution to reduce waiting lists;
- **Redesigning the service delivery model** and strengthening **health system regionalization** as a long-term strategy to expand access and reduce these queues.



Throughout 2024, we produced manuals, proposed a **pilot strategy** to reduce waiting lists, supported the **revision of access protocols for MRI and CT scans**, and developed diagnostics on care flows across the state—among other activities essential to the program’s advancement.

The experience built during the **first year of partnership** revealed a growing convergence between the program’s goals and the broader agenda of regionalization. For this reason, in 2025, **IEPS’s technical cooperation with the Government of Pernambuco** will be integrated into the **Redes Program**, aiming to ensure ongoing support for Cuida PE through a coherent and synergistic institutional approach.

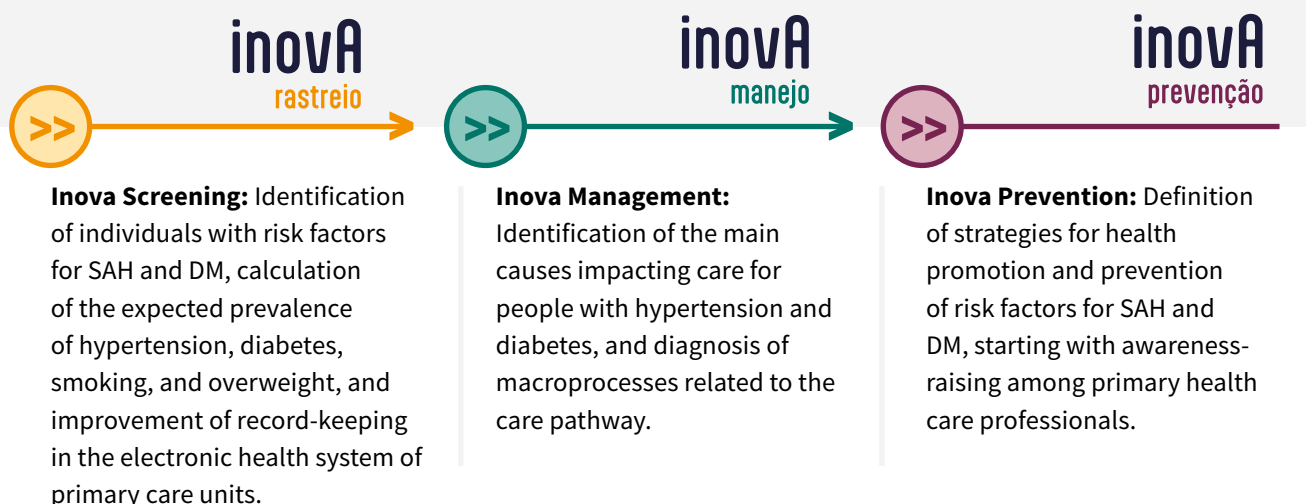
InovAPS

Screening, management, and prevention — these are the stages that guide the **InovAPS** approach in local territories. InovAPS is a project designed to support Brazilian municipalities in the **design and implementation of public policies** that help reduce the prevalence of **risk factors for systemic arterial hypertension (SAH) and diabetes mellitus (DM)**.



INOVAPS IN PRACTICE

Support for municipal health management is structured into three phases:





Since its launch in 2023, **InovAPS** has been implemented in the municipality of **Sobral**, the first in the country to adopt the initiative. The project **began** at the **Alto do Cristo Family Health Center (CSF Alto do Cristo)** with the implementation of **Inova Screening**, and throughout 2024, it was expanded

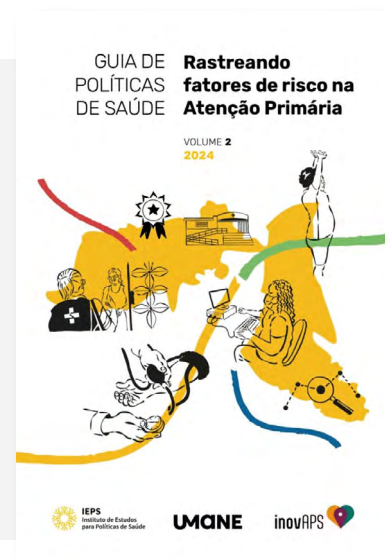
to **20 Family Health Centers (CSFs)** – representing **52% of the municipality's health units**.

By **October 2024**, the CSFs applying InovAPS processes were responsible for **75% of all risk factor-related consultations** in the municipality.



The implementation of **InovAPS in Sobral** was the focus of the **second edition of the Health Policy Guide**, which offers **comprehensive guidance** for managers, health professionals, academics, and other stakeholders interested in **improving care through a broader approach to risk factors**, both in clinical settings and across the territory.

[Read here](#)



The expansion process involved the **active participation of professionals from the Sobral Municipal Health Department**, who served as **multipliers of the initiative**, ensuring the project's **sustainability and continuity** through a logic of local autonomy and transformation of the health culture. In addition, managers are equipped with a **Practical Guide** that systematizes key actions to facilitate screening, streamlining work processes and **strengthening managerial autonomy**.

Another important step toward ensuring the **long-term sustainability** of the project in Sobral was the proposal of an **indicator matrix** to establish a **Risk Factor Surveillance System**, allowing data to be continuously monitored by both

management and health units through the **e-SUS** system. Once the system is implemented, it will be possible to **identify users screened for risk factors** and **track those diagnosed with hypertension and diabetes**.



The success of the initiative enabled **joint fundraising** alongside the **Recife Monitora** project. Both initiatives will receive support from **two new funders: Instituto Devive and Fundação Maria Emília**, which will allow for **expansion to new municipalities in 2025**.



Afluentes

Improving access to and effectiveness of health care in hard-to-reach areas of the Legal Amazon has become one of IEPS's institutional priorities in recent years. In 2023, we took the first steps to understand the region's specific needs and to engage with those who know and shape local health care. Our work began in the state of **Pará**, in the municipalities of **Aveiro, Belterra, and Santarém** — and it is in these Amazonian territories that the **Afluentes** project took root in 2024, with a more **consolidated and clearly defined approach**.

The objective of **Afluentes** is to reduce **morbidity and mortality** associated with challenges in the care of **pregnant women and people with hypertension** living in **hard-to-reach areas of the Legal Amazon**. Starting in 2024, through the formalization of **technical cooperation agreements**, we established



partnerships with **Aveiro, Belterra, and Santarém**, and expanded to three additional municipalities in western Pará: **Curuá, Oriximiná, and Itaituba**.

The project's aim is to support these municipalities in strengthening and implementing care pathways for **prenatal care and systemic arterial hypertension (SAH)**. To do this, **messaging technologies and health education tools** adapted to local cultural contexts will be used. Together with local specialists, health professionals, and the population, we aim to build **three key contributions to Primary Health Care in Pará**:

1

Co-creation of clinical protocols for hypertension and prenatal care lines, in collaboration with experts, health professionals, and local communities.

2

Provision of connectivity for **12 remote Primary Health Units (UBS)**, selected based on socioeconomic criteria and access barriers, enabling the deployment of **digital health and telehealth services**.

3

Use of messaging technologies — such as WhatsApp — to facilitate access to Primary Health Care services.

We are **not alone in this mission**. Afluentes is implemented with the **technical support of Projeto Saúde e Alegria** and the **NGO ImpulsoGov**, and it is also the result of **co-funding from Umame** and the **Juntos pela Saúde program**, an ini-

tiative of the **Brazilian National Development Bank (BNDES)** managed by the **Institute for the Development of Social Investment (IDIS)**. The project also receives support from **Instituto Arapy-aú** and **Concertação pela Amazônia**.



Arquipélago

Arquipélago also stems from the work initiated in 2023 in the Pará municipalities of **Aveiro, Belterra, and Santarém**. The project aims to **strengthen Primary Health Care in hard-to-reach areas**, with a focus on the **provision, attraction, and retention of health professionals**. To achieve this, Arquipélago proposes a **combined strategy** involving **health, education, and employment**, through an **unprecedented partnership for IEPS** with the **State University of Pará (UEPA)** and **Umane**.

The year **2024** marked the project's **co-creation and design phase**. Field visits were conducted to the cities of **Manaus (Amazonas), Belém, and Santarém (Pará)** to strengthen dialogue and build partnerships with local actors, including educational institutions, government representatives, community leaders, and social control agents. Workshops were also held with managers from the **Pará State Health Department (SESPA)** and **UEPA**, along with interviews with the **Primary Health Care coordinator of Soure**.



arquipélago

The development of **Arquipélago** is structured around three pillars: **Attract, Provide, and Retain**. The first phase, **Attract**, will begin in **2025**, focusing on strengthening the connection between **undergraduate students** at UEPA's School of Family and Community Medicine and the territory, through extension projects, elective courses, and/or internships in the interior regions of the Legal Amazon. The second phase, **Provide**, will focus on professionals enrolled in **Health Residency Programs in Pará**. Finally, the **Retain** phase will involve the design of a **Professional Retention Program for the state**, in partnership with **SESPA**.



Institutional Relations division

Advocacy and Political Engagement in Health



Photo: Daniel Paes/Iracema Comunicação



Agenda Mais SUS

Agenda Mais SUS is a project developed in partnership with **Umane** that works to strengthen and improve health policies in Brazil through advocacy initiatives and the production of data and scientific evidence. Originally created to inform the public debate during Brazil's **2022 General Elections**, the project has since expanded and now encompasses multiple areas of action.

In 2024, *Agenda Mais SUS* supported the Federal Executive in shaping and managing health policies through the **APS em Evidência** initiative; issued recommendations for candidates in the **2024 Municipal Elections** to prioritize primary health care through the **Agenda Mais SUS nas Cidades** campaign; and expanded its policy monitoring capacity with the launch of the **Radar Mais SUS** publication and the ongoing **Radar da Saúde**, which tracks political developments in the health sector.



agenda
mais  **SUS**



APS em Evidência

This initiative produces studies and fosters dialogue with the **Primary Health Care Secretariat (SAPS)** of Brazil's Ministry of Health, with the goal of supporting decision-making and enhancing the effectiveness and efficiency of public policies in **Primary Health Care (PHC)**. The partnership was formalized in February 2024 through a five-year **Technical Cooperation Agreement**, which also led to IEPS joining the **Interdisciplinary Thematic Committee on Primary**

Health Care (CTI-APS), organized by the **Interagency Network on Health Information (RIPSA)**.

The agreement is structured in five annual cycles. The definition of the scope and priority topics for the **2024–2025 cycle** began in May with a **workshop** that brought together representatives from IEPS, Umane, the **Pan American Health Organization (PAHO)**, and all departments of SAPS.



Workshop organized by IEPS to define the priority topics for technical cooperation with SAPS/MS for the 2024/2025 cycle.
Photo: IEPS/Press Release

Four key priority areas were defined for the first cycle of the partnership:

- The roles and responsibilities of **Community Health Workers (ACS)**
- The profile and functioning of **Primary Health Units (UBS)** with extended service hours
- **Multidimensional health assessment tools** for older adults
- **Vaccination, oral health, and mental health** components within the *School Health Program*





Agenda Mais SUS nas Cidades

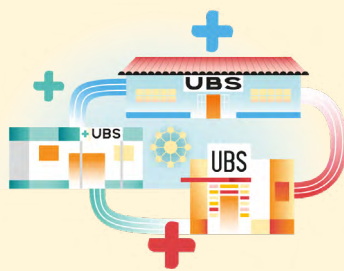
Agenda Mais SUS nas Cidades was created to bring public health to the forefront of the **2024 municipal election agenda** and has paved the way for IEPS's advocacy and political engagement at the local level. The project issued a set of policy recommendations urging candidates in the 2024 Municipal Elections to prioritize **strengthening Primary Health Care** in

their campaign proposals, with the aim of integrating these priorities into the political agendas of incoming administrations beginning in 2025.

Candidate commitments to these recommendations were formalized through the signing of the **Alliance for Public Health in Brazilian Municipalities**.



Key Priorities to Strengthen Primary Health Care in Brazilian Municipalities:



1 Expand the capacity of local health systems to improve access and infrastructure for Primary Health Care (PHC)

2 Ensure timely access to health care for all citizens



3 Strengthen the health workforce and promote the value of health professionals

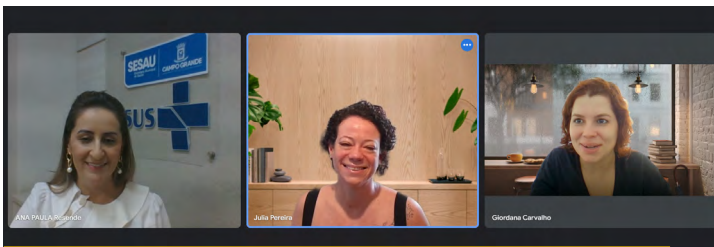
4 Improve communication strategies between the health system and the population



5 Enhance quality of life through stronger health promotion initiatives



Federal Deputy Luciano Ducci (PSB/PR) was one of the lawmakers who received the More SUS in Cities Agenda. Photo: Courtesy of IEPS.



Meeting with Ana Paula Resende, Superintendent of the Primary Care Network at Sesau/Campo Grande, held as part of the presentation and discussion of the Agenda Mais SUS nas Cidades proposals. Photo: Courtesy of IEPS.

The project was launched in **June 2024** and mobilized over **180 political stakeholders**, reaching **28 candidates** through meetings to present and discuss the proposed policy recommendations. As a result, **21 candidates** endorsed the initiative, representing a wide range of political parties—including **five winning candidates** in the 2024 municipal elections: **Ricardo Nunes (MDB)** in São Paulo, **João Campos (PSB)** in Recife, **Sílvio Mendes (União Brasil)** in Teresina, **Sebastião Melo (MDB)** in Porto Alegre, and **Eduardo Pimentel (PSD)** in Curitiba.

The advocacy and communication efforts of *Agenda Mais SUS nas Cidades* included the organization of **Diálogos IEPS #17**, the development of **infographics** featuring health indicators for all Brazilian state capitals, and technical support for the production of the **#asaudequeagentequer (#thehealthwewant) guide** — produced by **Umane** in an unprecedented partnership with **Contente**. The project gained significant visibility, with more than **80 media mentions** and over **800 downloads** of the proposal document between the launch and the second round of elections.

Agenda Mais SUS nas Cidades was made possible through a partnership with **Umane** and the **José Luiz Egidio Setúbal Foundation**, and received thematic support from **Instituto Desiderata** and **Inspier**.



Public Monitoring: Radar Mais SUS and Radar da Saúde

Public monitoring is essential to ensuring social accountability and enabling civil society participation in government decision-making. It is a core component of our political advocacy efforts.

In 2024, we strengthened this institutional commitment through two new initiatives. One of them is the **Radar Mais**

SUS Bulletin, a series of publications analyzing health regulations and indicators with potential impact on public health policy. In **November**, we released the first edition: ***Radar Mais SUS Bulletin No. 1 – The Provision of Public Health Services in Brazilian State Capitals in 2023***, which presented an in-depth analysis of service availability across Brazil's capitals.



REGIONAL INEQUALITIES: MANAUS HAS THE LOWEST AVAILABILITY OF HOSPITAL BEDS AMONG BRAZILIAN CAPITALS

Radar Mais SUS Bulletin No. 1 revealed that **Manaus** ranks last in terms of hospital bed availability, with only **17.9 beds per 10,000 inhabitants**. Other capitals with the lowest supply of beds include **Macapá (AP)**, **Rio Branco (AC)**, and **Boa Vista (RR)**, with **23.1**, **25.9**, and **29.4 beds per 10,000 inhabitants**, respectively.

➤ [Access the full bulletin](#)

The second initiative to strengthen civic oversight was the launch of **Radar da Saúde**, a platform focused on **political monitoring of actions by the Federal Legislative and Executive branches** in strategic areas of health policy in Brazil. Published every two months, the bulletin provides a contextualized overview of key government actions, offering society a concise summary of the agendas, bills, and decisions shaping the future of public health in the country.

Each edition of *Radar da Saúde* is built from continuous monitoring of nearly **200 keywords**, as well as tracking official websites and information systems from the **Chamber of Deputies**, the **Federal Senate**, and other relevant institutions. In 2024, two editions were released, covering highlights of federal health-related actions between **June and December 2024**.



➤ [READ THE 1ST EDITION](#)

➤ [READ THE 2ND EDITION](#)



Monitoring the Federal Health Budget

Our commitment to monitoring government action is also reflected in the **tracking of Brazil's federal health budget**. In 2024, the project produced original analyses on key topics such as **parliamentary amendments related to health**, the **role of Brazilian state**

capitals in financing public health, and the **evolution of the Ministry of Health's budget for Health Surveillance** over the past decade.

➤ [LEARN MORE ABOUT THE PROJECT](#)



Parliamentary Amendments: Where Are They Headed?

Continuous monitoring of the federal health budget revealed the need to develop evidence that characterizes how **parliamentary amendments** are allocated to health—and to strengthen the public debate around these mechanisms to promote greater transparency in their use.

Technical Note No. 35 – Parliamentary Amendments in Health: Where Are They Headed?, published in August with methodological support from researchers at the **Institute for Applied Economic Research (IPEA)** and **Conass**, highlighted how the Brazilian Congress is gaining greater influence over health budget allocations, often surpassing the Ministry of Health in decision-making power. The study demonstrated, for instance, the increasing dominance of the

Federal Legislature in funding both **Hospital and Ambulatory Care (AHA)** and **Primary Health Care (PHC)**. During the study period, health resources allocated via parliamentary amendments rose from **R\$ 5.7 billion to R\$ 22.9 billion**.

The study's findings received wide coverage in the Brazilian media. **G1** published an exclusive story on the research, and the results were also featured in a debate on **GloboNews' *Estúdio i*** program. In addition, the study was cited in opinion pieces published by **Congresso em Foco** ([see here](#)) and **Outra Saúde** ([see here](#)), and served as a key reference for the **timeline of parliamentary amendments** published by *Nexo Políticas Públicas*.



POLÍTICA

Congresso tem mais poder que Ministério da Saúde sobre gastos com assistência hospitalar e atenção básica

Estudo obtido com exclusividade pelo g1 mostra, por exemplo, que entre 2016 a 2023, o valor das emendas parlamentares destinadas à saúde cresceu mais de quatro vezes.

Por **Sara Curcino**, g1 e TV Globo — Brasília
20/08/2024 09h37 · Atualizado há 5 meses

Report published on August 20 covered the results of Technical Note No. 35.

➤ READ THE ARTICLE

In addition, we published an **opinion article in Congresso em Foco**, in partnership with the **Tide Setúbal Foundation** and **Transparência Brasil** ([see here](#)), and coordinated the **proposal of amendments to PLC 172/2024 and PLP 175/2024**, which were submitted to the offices of Senators **Alessandro Vieira (MDB/SE)**, **Randolfe Rodrigues (PT/AP)**, **Soraya Thronicke (PODEMOS/MS)**, and **Omar Aziz (PSD/AM)**.

Another key outcome of the study was an invitation from the **Intersectoral Commission on Budget and Financing (COFIN)** of the **National Health Council (CNS)** to present the findings of the technical note alongside representatives from the **Brazilian Health Economics Association (ABRES)** and **IPEA**. The presentation was part of **Participa+**, a dialogue and capacity-building event for health leaders and council members.



III PUBLIC BUDGET AWARD: GUARANTEEING RIGHTS AND COMBATING INEQUALITY

With its study on **parliamentary amendments in health**, IEPS was selected as one of the **12 finalists** of the **III Public Budget Award: Guaranteeing Rights and Combating Inequality**. The award is organized by the **Tide Setubal Foundation**, the **National Association of Planning and Budget Career Officials (ASSECOR)**, and the **Black Economists Network (REPP)**.



Advocacy for Mental Health Policy

In 2024, the *Advocacy for Mental Health Policy* project continued to build on the foundation laid in recent years, expanding its reach through new national and international partnerships. Over the course of the year, the initiative engaged **85 political stakeholders** across **81 events and meetings**.

The year's most significant milestone was the enactment of [Law No. 14.819/2024](#), which established the **National Policy for Psychosocial Support in School Communities**—a landmark legal framework for mental health care for children and adolescents in Brazil. IEPS contributed to this achievement starting

in 2021, providing **technical support in drafting the initial bill** and later engaging in sustained **advocacy efforts** for its approval and enactment.

The creation of the policy marked the beginning of efforts to **regulate the law through executive action**. One early outcome was the **announcement of an Interministerial Working Group** dedicated to implementing the law, made during the [6th Public Policy Forum hosted by the José Luiz Egydio Setúbal Foundation](#)—an event supported by IEPS, which focused on mental health challenges in school communities.



Dayana Rosa, IEPS Program Manager, moderated the panel “The Role of the School Community in Promoting Mental Health” at the 6th Public Policy Forum on Children’s Health. Photo: Alécio Cezar/FJLES.



Juntô: Brazilian Initiative for Child and Adolescent Mental Health

A major step in expanding our advocacy efforts for child and adolescent mental health was the formal launch of a partnership with the **Stavros Niarchos Foundation Global Center for Child and Adolescent Mental Health** at the **Child Mind Institute (CMI)**, which gave rise to **Juntô: Brazilian Initiative for Child and Adolescent Mental Health**.

The project brings together all IEPS departments in coordinated actions to generate data and scientific evidence, advance political advocacy, and engage with school communities and health and education managers to improve mental health policies for children and adolescents in Brazil.

In addition to the CMI, new partnerships were launched to strengthen collaborative efforts and expand the civil society ecosystem working on this issue—max-

imizing the project's social impact. One such partnership is with the **Felipe Neto Institute**, which will receive technical support from IEPS in the development of “*Criadores em Movimento*”, a training program for digital influencers focused on environmental issues, mental health, and disinformation.

One of the project's upcoming initiatives is **Juntô Jovem**, which will engage adolescents aged 16 to 18 from all five regions of Brazil. Co-led by IEPS, CMI, and **Google.org**, *Juntô Jovem* will include activities such as training modules on mental health, public policy, and political advocacy, as well as exchange opportunities with representatives from Brazil's Executive and Legislative branches—encouraging active youth participation in strengthening public mental health policy.



Executive Secretariat of the Parliamentary Front on Mental Health

The [Parliamentary Front on Mental Health \(FPSM\)](#) completed one and a half years of work in 2024. As the Front's **Executive Secretariat**, IEPS played a central role in advancing political dialogue with the **Legislative and Executive branches**, expanding public visibility and communication efforts, and introducing new thematic areas—such as mental health for **people with disabilities**.



The first year of the Front was marked by the [1st National Seminar](#), held on **May 8**, under the theme “*Mental Health Is a Right for All*.” The event took place in the Main Hall of the Chamber of Deputies and brought together approximately **400 participants**, including parliamentarians, researchers, communicators, mental health service users, and professionals from the **Psychosocial Care Network (RAPS)**.



Members of the Ministry of Health, then-Minister Nísia Trindade, and members of the Parliamentary Front on Mental Health. Photo: Carolina Antunes/MS



[VIEW THE DOCUMENT](#)

A major milestone of the year was the **presentation of the 2023/2024 Legislative Agenda** to then-Minister of Health **Nísia Trindade**. The agenda was introduced during a **meeting organized by IEPS**, with the participation of members of the Front, **Adriano Massuda**, Secretary of Specialized Health Care, and **Chico D'Angelo**, Special Advisor for Parliamentary Affairs—both of whom were with the Ministry of Health at the time.

IEPS was represented by **Filipe Asth**, Executive Secretary of the Front, who emphasized the importance of the meeting in strengthening dialogue with the Ministry and supporting the development of public mental health policy.



“This meeting was a critical gesture from the government, recognizing the parliamentary initiative that has brought mental health to the forefront in Congress. The Minister’s engagement with leaders of the Front marks a key moment in consolidating the first year of activities coordinated by us in the Executive Secretariat.”

Filipe Asth,
Executive Secretary,
FPSM

The Front also supported high-level discussions around the creation of a **National Policy for Indigenous Well-Being**, through meetings with **Adriano Massuda**, **Sônia Barros** (Director of the Department of Mental Health), **Antônio Fernando da Silva** (General Coordinator for Indigenous Health Care Actions at SESAI/MS), and technical leaders of the **Psychosocial and Indigenous Well-Being Program** at SESAI/MS.

Engagement with the Legislative branch was further strengthened through training initiatives. In partnership with **Re-des Cordiais** and **Vita Alere**, the Front organized the workshop **“Responsible Communication on Suicide”**, aimed at communication teams from the Executive and Legislative branches. The event drew more than **130 participants** and provided tools and guidelines for addressing the topic in a responsible and ethical manner.



Dayana Rosa, Program Manager at IEPS; Sara Tavares, Institutional Relations Analyst at IEPS; Filipe Asth, Executive Secretary of FPSM; and Rebeca Freitas, Director of Institutional Relations at IEPS, during the 1st National FPSM Seminar, held in Brasília.
Photo: Courtesy of IEPS.



Throughout 2024, the **Parliamentary Front on Mental Health (FPSM)** introduced **eight bills**, all of which benefited from IEPS's technical contributions to strengthen the quality and clarity of the proposals:

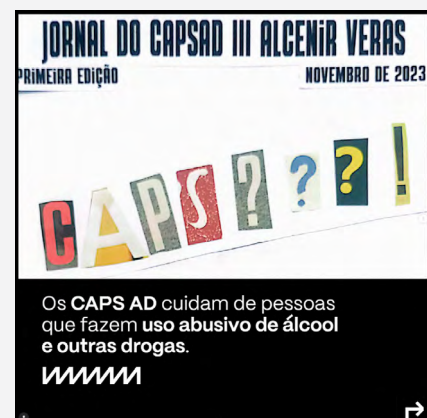
- [Bill No. 6,227/2023](#), which amends the National Drug Policy System to establish mechanisms for preventing irregular, abusive, or rights-violating practices in **Therapeutic Communities**.
- [Bill No. 777/2024](#), which sets forth actions to promote the mental health of **older adults and their caregivers** within the SUS and amends the National Elderly Policy.
- [Bill No. 922/2024](#), which defines general guidelines for **humanized police approaches** to individuals experiencing mental health crises.
- [Bills No. 1,881/2024 and 1,897/2024](#), which establish the **National Policy for Psychosocial Resilience in Response to Environmental Disasters**.
- [Bill No. 3,508/2024](#), which guarantees **psychological support within the SUS** for individuals who report acts classified as racism.
- [Bill No. 3,810/2024](#), which mandates **awareness campaigns on sports betting** and creates the **National Fund for the Prevention of Gambling Addiction**, among other measures.
- [Bill No. 3,889/2024](#), which establishes the **National Day for Mental Health Promotion Awareness**.



“NOT IN MY BACKYARD”

We contributed to the production of the episode *“Not in My Backyard”*, from the podcast *Rádio Novelo Apresenta*. The episode tells the story of the arrival of a **Psychosocial Care Center for Alcohol and Drugs (CAPSad)** in a neighborhood of **Niterói**, in the metropolitan region of Rio de Janeiro. It explores local residents' perceptions of the mental health service and its users, sparking a broader conversation about the challenges and stigmas surrounding mental health and substance use disorders.

This technical collaboration was made possible through a partnership with the **Betty and Jacob Lafer Institute**. As of December 2024, the episode had reached approximately **120,000 downloads**.



➤ [Listen to the episode](#)



X-Ray of Therapeutic Communities

As part of our role as Executive Secretariat of the **Parliamentary Front on Mental Health**, we also contributed to the **oversight of Therapeutic Communities**, with a particular focus on the need for **transparency in public funding** allocated to these facilities—culminating in the launch of the [X-Ray of Therapeutic Communities](#).

Launched in **June 2024**, this research and oversight platform brings together over **1,200 previously unpublished primary documents**, including contracts, agreements, and therapeutic project proposals. These documents were collected and systematized using **computational linguistics** and natural

language processing (NLP) methods, covering the period from **2019 to 2022**. All materials were obtained from the Executive Branch in response to **Requests for Information No. 35/2023 and No. 2559/2023**.

By **December 2024**, the platform had recorded **2,399 visits** and gained national media attention through reports by **GloboNews**, [O Globo](#), [Agência Brasil](#), **Congresso em Foco**, and other major news outlets—totaling over **270 press mentions**.

[➤ READ THE ARTICLE](#)



The Parliamentary Front in the Media

Communications efforts play a key role in the work of the **Parliamentary Front on Mental Health**, and are coordinated by **IEPS** in its capacity as Executive Secretariat. In addition to raising visibility for legislative initiatives aimed at

strengthening public mental health policy, the Front's communication strategies focus on translating knowledge and expanding access to reliable information on the contemporary challenges affecting mental health in Brazil.



HERE ARE A FEW HIGHLIGHTS FROM THE MEDIA COVERAGE OF THE FRONT:



Published in May, this opinion piece was co-authored by **Dayana Rosa**, Program Manager at IEPS and contributor to the Executive Secretariat of the Front, and **Paula Napolião**, Research Coordinator at the Center for Studies on Security and Citizenship (CESeC).

[➤ READ THE ARTICLE](#)

Published in the context of the **May 2024 floods in Rio Grande do Sul**, this article addresses the mental health impacts on front-line health workers and highlights the bill “*Caring for the Caregivers*” proposed by the Front to protect health professionals.

[➤ READ THE ARTICLE](#)





CONGRESSO EM FOCO

TRANSPARÊNCIA

Deputado enviou R\$ 2,7 milhões em emendas a comunidade terapêutica criada por colega

Eduardo da Fonte, do PP de Pernambuco, dedicou R\$ 2,7 milhões em emendas parlamentares a entidade fundada pela deputada Michele Collins.

Congresso em Foco
11/9/2024 | Atualizado às 17:26

COMPARTILHE ESTA NOTÍCIA



Eduardo da Fonte e Michele Collins: deputado destinou verbas de emendas parlamentares a fundação criada por depuada de seu partido. Fotos: Ag. Câmara

Ao longo dos anos de 2023 e 2024, o deputado **Eduardo da Fonte** (PP-PE) dedicou um valor considerável de suas **emendas individuais** ao patrocínio de comunidades terapêuticas vinculadas a aliados. Nesses dois anos, o deputado realizou sete repasses, no total de R\$ 2,7 milhões, à Sociedade Assistencial Saravida. A organização foi fundada por dois colegas de seu partido: o deputado estadual Cleiton Collins e sua esposa, a deputada federal **Michele Collins**, ambos de **Pernambuco**.

Michele é uma integrante recém-chegada ao **PP** na Câmara: ela era suplente até o mês de junho, quando assumiu a vaga de **Clarissa Tércio**, que se licenciou para se dedicar às eleições municipais. A nova deputada e o marido são aliados próximos do deputado **Lula da Fonte** (PP-PE), filho de Eduardo. Lula, inclusive, fez uma doação para a campanha de Cleiton Collins em 2022.

A report by **Congresso em Foco**, based on data from the Front, explored the allocation of **parliamentary amendments** to **therapeutic communities**.

➤ [READ THE ARTICLE](#)



Os repasses foram identificados a partir de dados da Frente Parlamentar Mista para a Promoção da Saúde Mental por meio do [Portal da Transparência](#). Ao todo, foram sete emendas distribuídas por Eduardo da Fonte neste mandato, além de outros repasses menores na legislatura anterior. A íntegra da [lista de emendas parlamentares para a Saravida pode ser acessada aqui](#).



Communications

The IEPS Communications team leads our mission to engage key stakeholders and elevate the quality of public debate around Brazil’s health system. In our fifth year of operation, the **IEPS website reached its highest number of views and visitors** since the organization’s founding—**over 200,000 page views** and **more than 70,000 active users**.

Our presence on social media also saw consistent growth. On **Instagram**, we recorded **39,000 organic reach** and **99,400 content views**. On **LinkedIn**, we reached **over 170,000 organic impressions** and engaged more than **95,000 users**.



ORGANIC GROWTH COMPARED TO 2023

97%

INCREASE IN REACH
ON INSTAGRAM

41,65%

INCREASE IN ACTIVE USERS
ON THE IEPS WEBSITE

427

ADDITIONAL MENTIONS
IN THE PRESS

Reach and Dissemination



FOLLOW
OUR WORK ON
SOCIAL MEDIA:



Instagram



LinkedIn



WhatsApp

+ 13.000

FOLLOWERS ACROSS SOCIAL MEDIA PLATFORMS

+ 4.000

NEW FOLLOWERS GAINED IN 2024

37.692 accounts reached

ORGANICALLY ON INSTAGRAM

177.186 impressions

ON LINKEDIN



Media Engagement

Media relations are a strategic pillar of IEPS's efforts to inform public debate and strengthen health policy in Brazil. In 2024, **IEPS was featured in 1,156 news stories**, the result of coordinated efforts

by our Communications team. These appearances spanned a wide range of formats—including **op-eds, editorials, and special reports**—and were published by major news outlets across the country.



Special Report

IEPS contributed to three episodes of the “**Municipal Challenges: Health**” special produced by **GloboNews**, which focused on the **2024 Municipal Elections** and addressed key themes such as **Primary Health Care** ([watch here](#)), the **Family Health Strategy** ([watch here](#)), and **Mortality in Public Health** ([watch here](#)). The episodes aired in **Jornal das Dez** and **Conexão GloboNews** during the month of September.



Maria Letícia Machado, from IEPS, was interviewed alongside Professor Ligia Bahia (UFRJ) and Dr. Gonzalo Vecina, physician and public health expert.



Opinion Articles



Evidence in response to denialism in drug policie

MAY 23 | By Dayana Rosa (IEPS) and Paula Napolião (CESeC)

[↗ Read here](#)



Roots of the private healthcare crisis in Brazil

OCTOBER 14 | By Arminio Fraga (IEPS), Miguel Lago (IEPS), and Paulo Chapchap (IEPS)

[↗ Read here](#)

Health amendments and lack of transparency: is there light at the end of the tunnel?

OCTOBER 18 | By Victor Nobre (IEPS), Júlia Pereira (IEPS), Rebeca Freitas (IEPS), Marina Atoji (Transparência Brasil), Pedro Marin (Fundação Tide Setubal), and Mariana Almeida (Fundação Tide Setubal and Insper)

[↗ Read here](#)



Public-Private Relations in Healthcare: in search of the lost Assurance

OCTOBER 30 | By Rudi Rocha (IEPS) and Leonardo Rosa (IEPS)

[↗ Read here](#)

“We need a strengthened SUS, an efficient private sector, and, above all, an integrated health system. More than avoiding setbacks, it is crucial to expand and strengthen the health insurance mechanisms in the country. **The debate is set: as a society, are we ready to face these challenges and ensure a health system that protects all Brazilians, regardless of the financing model, leaving no one behind?**”

Rudi Rocha (IEPS) and **Leonardo Rosa** (IEPS) in an article published in *Futuro da Saúde*



Column TechSUS



The TechSUS column premiered in April 2024 and is the result of a partnership with *JOTA*, one of the leading digital media outlets specializing in the coverage of Brazilian public institutions. The column publishes monthly analyses on the main challenges of digital health in Brazil.

When virtual platforms become a public health problem?

DECEMBER 31 | By Priscila Borges (IEPS), Maria Letícia Machado (IEPS), Dayana Rosa (IEPS)

[Read here](#)

Bill 2,338/2023 and the impacts of AI regulation in the health sector

NOVEMBER 25 | By Pedro Braga (ITS) and João Victor Archegas (ITS)

[Read here](#)

Innovation, technology, and anticipatory governance in health

OCTOBER 28 | By Maria Letícia Machado (IEPS)

[Read here](#)

SUS, 34 years: a continuous evolution in overcoming challenges

SEPTEMBER 30 | By Luciana Lischewski Mattar (InovaHC) and Natasha Zanaroli Scaldaferrri (InovaHC)

[Read here](#)

Completeness of racial data: a path to reducing health inequalities

SEPTEMBER 3 | By Rony Coelho (IEPS), Maria Letícia Machado (IEPS), Izaide Ribeiro dos Santos (Ministry of Health)

[Read here](#)



How can technology help reduce waiting times for care in SUS?

JULY 29 | By Maria Letícia Machado (IEPS)

[↗ Read here](#)

What exactly is health-related data?

JUNE 24 | By Sara Ellen Tavares (IEPS) and Maria Letícia Machado (IEPS)

[↗ Read here](#)

The role of digital health in the 2024 municipal elections

MAY 27 | By Maria Letícia Machado (IEPS) and Sara Ellen Tavares (IEPS)

[↗ Read here](#)

From the G20 Summit to the House of Representatives: health information and the future of SUS

APRIL 29 | By Maria Letícia Machado (IEPS) and Sara Ellen Tavares (IEPS)

[↗ Read here](#)



Saúde em Público

FOLHA DE S.PAULO
★ ★ ★

Saúde em Público is IEPS's blog hosted by *Folha de S. Paulo*.
Check out all the articles published in 2024

Shifting the focus of care in supplementary health: from the hospital to the people

NOVEMBER 27 | By Renato Tasca (IEPS)

[↗ Read here](#)



Climate change is placing growing pressure on health professionals

NOVEMBER 13 | By Ana Maria Malik (FGVsaúde), Evangelina da Motta Pacheco Alves de Araujo (Faculty of Medicine, USP), and Silvia Morais (Synergos)

[Read here](#)

The necessary dialogue in SUS

OCTOBER 28 | By Ricardo de Oliveira (Umane)

[Read here](#)

Mandatory reporting of Sickle Cell Disease: a crucial step for effective public policies

OCTOBER 25 | By Manuel Mahoche (IEPS), Altair Lira (ABPN), and Rony Coelho (IEPS)

[Read here](#)

Tragedy before, during, and after school?

SEPTEMBER 20 | By Dayana Rosa (IEPS), Angelica Duarte (IEPS), Filipe Asth (IEPS), and Rebeca Freitas (IEPS)

[Read here](#)

Tax Reform and Health Financing

SEPTEMBER 19 | By Antonio Carlos Rosa de Oliveira Junior (Conass), Blenda Leite Saturnino Pereira (Conasems), Jurandi Frutuoso (Conass), and Mauro Guimarães Junqueira (Conasems)

[Read here](#)

What is the state of health in Brazil?

SEPTEMBER 9 | By Ricardo de Oliveira (Umane)

[Read here](#)



Hungry for what?

AUGUST 26 | By Raphael Barreto da Conceição Barbosa (Instituto Desiderata), Ana Carolina Rocha de Oliveira (Instituto Desiderata), and Fabíola Leal (Instituto Desiderata)

[!\[\]\(83c367f161866fb5327430370993bbe0_img.jpg\) **Read here**](#)

When a delivery fee can cost a life

JULY 10 | By Marcella Semente (IEPS), Júlia Pereira, and Rony Coelho (IEPS)

[!\[\]\(19ed28329eb8aff02a78b4d1b1b37616_img.jpg\) **Read here**](#)

Criminalization harms health

APRIL 16 | By Chico Cordeiro (PBPD), Helena Fonseca Rodrigues (PBPD), Luana Malheiro (PBPD), Nathália Oliveira (PBPD), Renato Filev (PBPD), and Tatiana Diniz (PBPD)

[!\[\]\(5cf19772dbb613495e4c8c866dd4336f_img.jpg\) **Read here**](#)

Does SUS have a way forward?

APRIL 10 | By Ricardo de Oliveira (Umane)

[!\[\]\(919e27c59493ed5f0af31b9612a87443_img.jpg\) **Read here**](#)

Innovating by returning to the basics: the case of Sobral

MARCH 15 | By Beatriz Almeida (IEPS), Caio Rabelo (IEPS), Jéssica Remédios (IEPS), Danielli Mendes de Sousa (SMS-Sobral), Larisse Araújo de Sousa (SMS-Sobral), Letícia Reichel dos Santos (SMS-Sobral), and Regilânia Parente (SMS-Sobral)

[!\[\]\(44e2147b576a21ab7a2a881479731858_img.jpg\) **Read here**](#)

Prioritizing Primary Care is the best way to strengthen SUS

SEPTEMBER 2 | By Rebeca Freitas (IEPS), Evelyn Santos (Umane), Márcia Kalvon Woods (FJLES), and Sara Tavares (IEPS)

[!\[\]\(1b786c37fb7c6d929a826caf381a7891_img.jpg\) **Read here**](#)

It is necessary to affirm the collective dimension in the mental health debate

JANUARY 24 | By Filipe Asth (IEPS)

[!\[\]\(ea929770061fe356f49a5c491d2b82ce_img.jpg\) **Read here**](#)



Nexo Políticas Públicas

Alongside prominent third sector organizations and research centers, we are partners with *Nexo Journal* on the *Nexo Políticas Públicas* project—an academic-journalistic platform that presents a series of scholarly content in clear language and innovative formats..

ASK A RESEARCHER

Fabro Steibel: regulation and use of artificial intelligence in health

DECEMBER 6 | With Fabro Steibel, from the Institute for Technology and Society of Rio

[↗ Read here](#)

Rossano Cabral Lima: the harms of self-diagnosis for children and adolescents

DECEMBER 26 | With Rossano Cabral Lima, from the Institute of Social Medicine at UERJ

[↗ Read here](#)

Altair Lira: sickle cell disease in Brazil

OCTOBER 25 | With Altair Lira, from the Brazilian Association of Black Researchers

[↗ Read here](#)

Giovanni A. Salum: public policies for child and adolescent mental health

JUNE 24 | With Giovanni A. Salum, from the Global Programs at the Child Mind Institute and Stavros Niarchos Foundation

[↗ Read here](#)

Helena Arruda: municipal government transitions and impacts on child health

APRIL 12 | With Helena Arruda, from the Institute for Health Policy Studies

[↗ Read here](#)



ACADEMIC

The transition toward cancer as the leading cause of death in Brazil

NOVEMBER 14 | By Beatriz Rache (UCLA) and Leandro Rezende (EPM/UNIFESP)

[↗ Read here](#)

Racial inequalities, mental health care, and mortality in Rio de Janeiro

APRIL 9 | By Sophia Medeiros (Imperial College London)

[↗ Read here](#)

GLOSSARY

Supplementary health

NOVEMBER 4 | By Helena Arruda (IEPS)

[↗ Read here](#)

Quality in Primary Health Care

MAY 13 | By Agatha Eleone (IEPS) and Caio Rabelo (IEPS)

[↗ Read here](#)

Mental health of children and adolescents

MAY 7 | By Dayana Rosa (IEPS) and Rebeca Freitas (IEPS)

[↗ Read here](#)

TIMELINE

Parliamentary amendments: what has changed since the 1988 Constitution?

OCTOBER 2 | By Victor Nobre (IEPS), Marcella Semente (IEPS), and Milena Rodrigues (IEPS)

[↗ Read here](#)

Mental health policies for children and adolescents

JULY 25 | By Dayana Rosa (IEPS) and Rebeca Freitas (IEPS)

[↗ Read here](#)



QUESTIONS SCIENCE HAS ALREADY ANSWERED

The National Policy on Mental Health in Schools, in 5 key points

MAY 29 | By Dayana Rosa (IEPS)

[↗ Read here](#)

OPINION

The National Policy on Mental Health in Schools has been created—what now?

MARCH 25 | By Dayana Rosa (IEPS) and Rebeca Freitas (IEPS)

[↗ Read here](#)



IEPS Informa

IEPS Informa is the IEPS newsletter featuring a curated selection of health-related content and information. In 2024, we changed its frequency and launched a new distribution format. We now produce a **weekly edition**, sent every Thursday, highlighting the top health news stories, and a **monthly edition**, sent during the last week of each month, featuring IEPS updates and announcements, a selection of scientific articles, data releases from IEPS Data, and recommendations for courses, events, opportunities, and other resources from the health ecosystem.

1,840 subscribers in 2024

[↗ CHECK OUT ALL EDITIONS OF IEPS INFORMA HERE](#)



IEPS on WhatsApp

In February 2024, we launched the IEPS channel on WhatsApp. This initiative introduced a new way to share research, news, and opportunities from IEPS on one of the most widely used messaging platforms in the country. Since its launch, the channel has reached **334 followers**.

[↗ FOLLOW THE CHANNEL](#)



IEPS Dialogues

#16 | MARCH 25

IMPLEMENTING QUALITY MONITORING STRATEGIES IN PRIMARY CARE

The first *IEPS Dialogues* of 2024 marked the launch of the *Health Policy Guide: Implementing Quality Improvement Systems in Primary Health Care*. The guide provides a step-by-step approach for municipal administrations across the country to implement quality improvement systems in Primary Care, inspired by the development of the *Recife Monitora* program—one of the initiatives under *Qualifica Atenção Básica*. This program is the result of a partnership with the Recife City Hall and is supported by Umane.

DIÁLOGOS IEPS
OS SEMINÁRIOS DO IEPS

Lançamento do vol. 1 do Guia de Políticas de Saúde

Implementando estratégias de monitoramento da qualidade na Atenção Básica

25 de março • 15h • Youtube

Agatha Eleone
Analista de Políticas Públicas do IEPS

Gabriela Lotta
Professora de Administração Pública e Governo da FGV

Luciana Albuquerque
Secretária de Saúde do Recife

Marcia Castro
Chefe do Depto. de Saúde Global da Escola de Saúde Pública de Harvard

Mediação: Ricardo Gandour
Jornalista e consultor sênior de comunicação do IEPS

IEPS Instituto de Estudos para Políticas de Saúde

UMANE

[watch here](#)

PARTICIPANTS OF IEPS DIALOGUES #16:

Gabriela Lotta

Professor of Public Administration and Government at FGV

Luciana Albuquerque

Health Secretary of Recife

Marcia Castro

Chair of the Department of Global Health at Harvard T.H. Chan School of Public Health

Agatha Eleone

Public Policy Analyst at IEPS



IEPS Dialogues

#17 | SEPTEMBER 18

2024 ELECTIONS: HOW CAN CITY GOVERNMENTS IMPROVE THE SUS IN MY CITY?

The 17th edition of *IEPS Dialogues* brought together a SUS user, a public health and policy researcher, and health professionals from different regions of Brazil who work in management, service provision, and participatory policy forums to discuss public health in Brazilian municipalities.

The poster features a yellow background with the IEPS logo at the top left. The text reads: "DIÁLOGOS IEPS OS SEMINÁRIOS DO IEPS", "Agenda Mais SUS nas Cidades apresenta", "Eleições 2024: como a Prefeitura pode melhorar o SUS na minha cidade?", "18 de setembro • 14h • Youtube". Below this are five circular portraits of participants: Julia Pereira, Yolanda Cunha, Marcus Brenno, Rubênia Pires, and Suzzi Lopes. At the bottom are logos for IEPS, UONE, and FUNDAÇÃO José Luiz Egidio Setúbal.

[watch here](#)

PARTICIPANTS OF IEPS DIALOGUES #17:

Julia Pereira

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IEPS Dialogues

#18 | NOVEMBER 5

TRACKING RISK FACTORS IN PRIMARY HEALTH CARE

The final *IEPS Dialogues* of the year marked the launch of the second edition of the *Health Policy Guide*, which presents strategies for managers, health professionals, academics, and others to reflect on and adopt risk factor screening techniques in their territories. The *Health Policy Guide: Tracking Risk Factors in Primary Health Care* is based on actions and implementation practices from *InovAPS* in Sobral, Ceará—the first municipality in Brazil to host the project.

DIÁLOGOS IEPS
OS SEMINÁRIOS DO IEPS

Lançamento da 2ª edição do Guia de Políticas de Saúde

**Rastreando Fatores de Risco na
Atenção Primária à Saúde**

05 de novembro • 14h • Youtube

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