

**Annual Report**

**2021**



**IEPS**

Instituto de Estudos  
para Políticas de Saúde

**Annual Report**

**2021** 2nd YEAR



**IEPS**  
Instituto de Estudos  
para Políticas de Saúde

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## Letter from the Founder and Chairman of the Council

**Arminio Fraga**

It is fascinating and at the same time extremely motivating to witness the IEPS completing its second year of activities, portrayed in this report. It is extraordinary to see a young, talented and eclectic team so engaged in public health policy issues in this country.

The facts and data that follow demonstrate this engagement, leveraging the relevant expansion in our work fronts both in term of research and practices, and materialized in the form of studies and technical notes, policy briefs, partnerships with governments, events and webinars, with impact and repercussion in Brazil and abroad. Our motivation is renewed when we see how much we can do. A good example of this mindset was the IEPS support for the Bill that introduces restrictions on the sale of ultra-processed foods in schools in the city of Rio de Janeiro and which led me to cosign an article with chef Rita Lobo.

This second edition of the Annual Report tells us that the seed is well germinated. A seed planted just before the pandemic, which was only possible to cultivate and grow thanks, from the beginning, to the support of the Advisory Council and more recently of the Deliberative Council, which brought experience and inspiration and, throughout the journey, the adhesion of partners that share the same values and purposes, with convergent goals. I would like to thank all of them immensely.

With a growing team – in 2021, eight professionals from different areas joined IEPS – and vital partnerships, we can tell that all this work has just begun. Its fruits, summarized below, prove that together we are on the right path.

**“ *Its fruits, summarized below, prove that together we are on the right path.* ”**



# Introduction

2021 was a year of great expansion for the Institute of Studies for Health Policies. Expansion in many ways. In its second full year of life, IEPS, in addition to covering the unfolding and consequences of the COVID-19 pandemic, has also focused on systemic priorities in the health area. Primary care, mental health and chronic diseases played a central role in the Institute's activities. IEPS also established new strategic partnerships, both in practice and in research, and structured an area of political monitoring and advocacy. It also innovated in its ways of communicating on health topics, with the creation of the brands Olhar IEPS, Panorama IEPS, IEPS Informa and the series of webinars Diálogos IEPS.

The academic production addressed several themes of central importance to the health segment in Brazil, such as mental health, primary care and health in the Legal Amazon region. In all, there were 7 scientific articles published in peer-reviewed journals, 9 technical notes and 8 other institutional publications. The research team made significant advances on institutional lines of studies and projects.

In 2021, the Institute started a collaboration front with Recife City Hall. It also strengthened its collaboration with other organizations, such as Umane, Instituto Cactus, Instituto Veredas, Instituto Carê and the AWS Foundation, in health-oriented projects. In addition, the Institute worked on the elaboration and monitoring of the development of two bills of law.

During the activities of the Parliamentary Committee of Inquiry (CPI) on the pandemic, the Institute analyzed and monitored the discussions in weekly columns, published in the print edition and on the website of the newspaper "O Globo". Through "Saúde em Público", a blog on "Folha de S. Paulo", the Institute contributed to the public debate on health policies in Brazil, with 43 texts signed by the Institute itself and by guest authors. With Nexo Jornal, it consolidated a content partnership through the "Nexo Public Policies" platform.

To deal with these new fronts and challenges, IEPS developed its own structure even further: the size of the

team was almost doubled, with preference to remote operations, having their people management practices improved and adapted to the data guidelines under the new LGPD (General Data Protection Law). In addition, the Institute collaborated with political and academic leaders from several places in Brazil and abroad.

2021 was a structuring year for IEPS activities. The result is a prepared team and an even more robust and challenging work schedule. This is an essential step to maintain the capacity to respond to the demands for the improvement of public health policies in Brazil.

This annual report aims to present a summary of a productive year and the important advances in all fronts of IEPS, at a critical moment for health in the country - a moment when significant portions of the population suffer with the progress of the pandemic and its effects on the private and public spheres. At the same time, this document offers maximum transparency to all stakeholders through an overview of the activities undertaken and their results.

**We thank our employees, partners and supporters.**

**None of what is reported below would be possible without the trust and dedication of people engaged and motivated with causes linked to increasingly better public health policies in Brazil.**

# In 2021, we produced, organized and disseminated knowledge...

IEPS' scientific productions gained new formats,  
were featured in prestigious worldwide academic  
journals and strengthened cooperation with  
national and international researchers and institutions





Articles by the IEPS research team have been published or are under review by journals such as **Health Economics, Lancet Global Health, Lancet Regional Health, Epidemiology and Psychiatric Sciences, Journal of Human Capital and World Development**

Our Technical Notes and Institutional Studies have been published by major national and international media outlets, such as **National Geographic, Folha de S. Paulo, Nexo and O Estado de S. Paulo**

There were collaborations with renowned external co-authors, such as **Rifat Atun (Harvard), Marcia Castro (Harvard), Adriano Massuda (FGV-Saúde), Rodrigo Soares (Insper/Columbia), Mônica Viegas (CEDEPLAR/UFMG), among other academics**

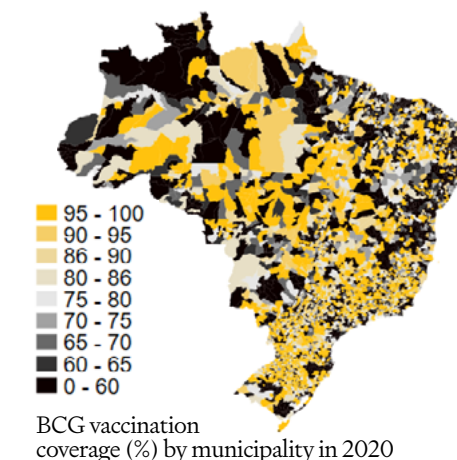
# 31 Publications

- +9 Technical Notes
- +4 Working Papers
- +2 Institutional Studies
- +3 Olhar IEPS
- +3 Panorama IEPS
- +7 Scientific articles published
- +3 ... and other 3 in the process of submission or finalization

## HIGHLIGHT

### Panorama IEPS 1: Overview of Vaccination Coverage in Brazil, 2020

Panorama IEPS no. 1 followed the evolution of vaccination coverage in Brazil in recent years and provided an x-ray of the situation in 2020, the first year of the pandemic, for nine immunobiologicals present in the National Vaccination Calendar: polio, MMR (first dose), BCG, pentavalent, hepatitis B (in children up to 30 days), hepatitis A, pneumococcal, meningococcal C and human rotavirus.



## HIGHLIGHT

### Technical Note 18: How Many Lives Fit into a Vote?

Technical Note 18 evaluated the extent to which the acceleration of mortality from COVID-19, throughout the first quarter of 2021, was influenced by the speech of the President of the Republic about the behavior of the population. The analysis combined the number of daily deaths from COVID-19, by municipality and state, up to March 28, 2021, the adherence to social distancing in states and municipalities, and data from the 2018 presidential elections made available by the Superior Electoral Court (TSE)

at the municipal level. The results indicated the existence of a positive relationship between electoral support for the president and the acceleration of mortality from COVID-19 in 2021 in Brazil. Mortality accelerated exactly in the states and municipalities that most voted for Bolsonaro in 2018, where social distancing has been lower. Therefore, political and electoral support for Bolsonaro was directly correlated with the observed mortality: more votes, fewer lives.

# Technical Notes

- a. December 2021** Rocha, R.; Salmen, MC; Lima, T., Miessi, F.; Moreno-Serra, R.; Mrejen, M.; Rache, B.; Soares, R.R. and M. Viegas. **Considerations on the Health Insurance Law Reform and its Possible Impacts on the SUS (Unified Health System).**
- b. November 2021** Faria, M.; Nobre, V.; Tasca, R. and A. Aguillar. **The 2022 Health Budget Proposal.**
- c. August 2021** Rache, B.; Nunes, L.; Freitas, R.; Aguillar, A.; Bigoni, A.; Tasca, R.; Malik, A.M.; Cupertino, F.; Frutuoso, J. and A. Massuda. **Health Budget Pressures for 2021 and Beyond.**
- d. July 2021** Fonseca, E.M.; Davidian, A.; Coutinho, C. and N. Dias. **Vaccines acquired and approved for use in Brazil against COVID-19.**
- e. May 2021** Mrejen, M.; Rache, B. and L. Nunes. **COVID-19 and Mental Health: An Analysis of Recent Trends in Brazil.**
- f. April 2021** Nunes, M.; Aguillar, A.; Lotta, G.; Thami, H. and M. Lago. **Success Cases: The Response of Small Municipalities in the North and Northeast to the Pandemic.**
- g. March 2021** Rache, B.; Lago, M.; Falbel, F. and R. Rocha. **How Many Lives Fit into a Vote?**
- h. February 2021** Rache, B. and M. Castro. **Acceleration of Deaths by COVID-19 in Capitals and States in 2021.**
- i. February 2021** Nunes, L. **Vaccines: History, Recent Lessons and Current Coverage in Brazil.**

# Working Papers

- a. October 2021** Mrejen, M. and R. Rocha. **Evolution and Inequalities in Depression Prevalence and the Treatment Gap in Brazil: A Decomposition Analysis**
- b. August 2021** Soares, R.; Rocha, R. and M. Szklo. **American Delusion: Life Expectancy and Welfare in the US from an International Perspective**
- c. June 2021** Ramos, P. and A.A. Sant’Anna. **Vaccination against COVID-19 of people with disabilities in the city of Rio de Janeiro: scenario and current challenges**
- d. February 2021** Gomes, A.R.; Almeida, M.T.; Santos, J.; Paez, A. and F. Lopes. **Assessing the Impact of Social Distancing on COVID-19 Cases and Deaths in Brazil: An Instrumented Difference-in-Differences Approach**

# Institutional Studies

- a. November 2021** Rocha, R.; Camargo, M.; Falcão, L.; Silveira, M. and G. Thomazinho. **Health in the Legal Amazon: Recent Evolution and Challenges in a Comparative Perspective**
- b. October 2021** Mrejen, M. and R. Rocha. **Hiring Mental Health Professionals: Evidence from a Large-Scale Primary Care Policy in Brazil**

This study systematically characterized the recent evolution and the current health situation of the population of the Legal Amazon, as well as the care network, the availability of resources and health professionals, the offer and access to services, financing and governance of health in the region. The mismatch between the growing needs for health services and the difficulty to respond to these needs can sustain a widening of the difference in life expectancy between the Legal Amazon and the rest of the country, as the population continues to age. As an aggravating factor, part of the existing resources - and which are relatively scarce - continue to be directed to the treatment of communicable diseases and trauma related to external causes that persist in the region. If current trends are maintained, therefore, there is a forecast of widening inequalities and, eventually, a deceleration of gains in life expectancy over time in the Legal Amazon.

This paper evaluated the impact of the Family Health Support Centers (NASF in Brazil), a public policy that expanded the range of services offered by the main Primary Health Care program in Brazil, the Family Health Strategy, including the services geared to mental health. In addition, it explored the progressive implementation over time of the policy in Brazilian municipalities, showing that the NASFs had a positive impact on the availability of non-medical health professionals in Primary Care services and on the use of these services, but had a lower impact in the supply of specialized doctors. No impact of the policy was observed on deaths, hospitalizations and days of absence from causes related to mental health or from other causes. The results showed the challenge of increasing the supply of primary care services by scarcer and higher-paid health professionals, such as psychiatrists, and that increasing the supply of these professionals and the use of services may not be enough to improve extreme outcomes.

# The New IEPS Brands



## OLHAR IEPS

The IEPS policy brief consists of documents that propose, in a clear and concise way, public policy recommendations for the most urgent health problems in Brazil. In each document, IEPS justifies these recommendations based on data and scientific evidence. In 2021, 3 documents of this nature were released.



## PANORAMA IEPS

More detailed reports covering time intervals in specific periods, which monitor the evolution of public policies and planning and execution bottlenecks in specific sectors of health management in Brazil. In 2021, IEPS worked on the dissemination and impact of “Panorama IEPS” on vaccine coverage, lines of care for Chronic Noncommunicable Diseases (NCDs) and innovation.

## DIÁLOGOS IEPS

Created in 2021, the new IEPS seminar format usually takes place in parallel with the release of a document, such as an Olhar IEPS. Five editions were held online throughout the year in the form of webinars, due to the restrictions imposed by the COVID-19 pandemic. The objective of the “Diálogos IEPS” is to deepen, disseminate and make the debate on public health problems, challenges and policies in Brazil more accessible. The webinars expanded the scope of the research developed by the Institute and dialogued with journalists, citizens and experts from civil society organizations, universities and public administration.



## IEPS INFORMA

The IEPS bi-weekly newsletter was consolidated under a new name in 2021. On Tuesdays and Thursdays, subscribers receive the best content of the week in health, management and public policies. On Tuesdays, the selection is made of academic articles from the most renowned scientific publications; on Thursdays, the news that mostly impacted the national and international press. The newsletter is also a means of disseminating IEPS productions, news and events, based on special reports. In 2021, there were 143 reports. The number of subscribers went from 689 in December 2020 to 946 in December 2021, an increase of 37%.



# Olhar IEPS

**a.**

## **October 2021: How is mental health in Brazil? Evolution, inequalities and access to treatments**

The prevalence of depression among the adult population in Brazil grew by 36.7% between 2013 and 2019, and currently affects one in every ten individuals older than 18 years. Despite the scale of the problem, seven out of ten adults with symptoms of depression do not receive any treatment. To bridge this gap, the World Health Organization (WHO) recommends incorporating mental health services into all levels of care, including primary care. Since 2008, Brazil has implemented the Family Health Support Centers (NASF), which have contributed to improving the availability of mental health professionals. The policy had no impact on mortality, hospitalizations and leaves of absence related to mental health reported to the INSS. However, more detailed data are needed to better measure the policy's impact on less extreme outcomes.

**b.**

## **September 2021: How to address bottlenecks in the implementation of Lines of Care for Chronic Noncommunicable Diseases in Primary Health Care**

For every 4 deaths that occur in Brazil, 3 are caused by Non-Communicable Chronic Diseases (NCDs). In Brazilian municipalities, the Lines of Care for the management of NCDs are still in the world of fiction. To effectively treat these diseases, municipal managers need to reduce the bottlenecks in access to Primary Care, expand the registry and follow-up on patients with these conditions, in addition to ensuring greater adherence to treatments. Local experiences in cities of different sizes and regions of Brazil show that it is possible to improve the management of these diseases, making health systems more resolute and allowing Brazilians to live longer and better.

**c.**

## **May 2021: The impact of 24-hour UPAs (Emergency Care Units) on hospital indicators and the population health**

The hospital system was positively impacted by the presence of UPAs, which reduced the demand pressure on hospital emergency rooms, improved their mortality indicators and reduced hospitalizations for causes sensitive to Primary Care. However, these new establishments do not significantly alter the municipalities' mortality figures. What happens is, above all, a displacement of deaths from hospitals to the UPAs. The results showed that there is room for improvement in the integration of different levels of care, through more efficient referral and counter-referral flows, and in the strengthening of a more resolute primary care system.

# Panorama IEPS

**a.**

**November 2021:** Aguillar, A.; Leal, F.; Thami, H. and V. Nobre. **Overview of Health Innovation in Brazil**

This Panorama analyzed the main obstacles and possible paths for promoting health innovation in Brazil. From the literature review and interviews with players from the third sector and governments that implement health innovation in the public sector, the research identified a polysemy and a difficulty in conceptualizing innovation (which can be a barrier for it to happen). In addition, it also addressed the main problems that prevent innovation from occurring successfully: solutions are adopted without first understanding the problems; there is difficulty in scaling innovative initiatives and a hostile environment for innovation in the public sector. The report pointed out the main critical obstacles of the Unified Health System (SUS) and which innovation efforts should be strengthened. Despite all the challenges, there is a great opportunity for innovation in health in Brazil, since SUS is the greatest asset for innovation that we could use.

**b.**

**July 2021:** Eleone, A.; Aguillar, A.; Leal, F.; Thami, H.; Remédios, J.; Machado, M.L. and R. Freitas. **Lines of Care for Chronic Noncommunicable Diseases in Primary Health Care**

This Panorama analyzed the management of the Lines of Care for Chronic Non-Communicable Diseases (NCDs) in Brazilian municipalities. Based on a vast literature review and interviews with municipal managers, frontline health professionals and SUS users, the research concluded that CNCDs are today the main challenge of our health system and the effectiveness of its Lines of Care is an important determinant of the well-being of the Brazilian population. In general, the NCD Lines of Care are not properly implemented in Brazilian cities, mainly for seven reasons listed in this Panorama. The second part of the Panorama brought several solutions that are being implemented by Brazilian municipalities and that show that this is a challenge that public management is able to solve.

**c.**

**May 2021:** Nunes, L. **Overview of Vaccination Coverage in Brazil, 2020**

Vaccination in general already had a significant drop in its national coverage between 2015 and 2019. The percentages went from values above the targets of 90% or 95% in 2015 to levels considerably below recommended in 2019, and in 2020 this was considerably exacerbated in Brazil and in the world due to the COVID-19 pandemic. The study contributed to the monitoring and analysis of vaccination policies in the country, in order to identify advances and setbacks at different geographic levels, and stimulate the debate on problems and possible solutions.



# Scientific Articles

## Published

- a. December 2021:** World Development. **Winds of Fire and Smoke: Air Pollution and Health in the Brazilian Amazon** (Rocha, R., Sant'Anna, A. A.)

In this paper we assess the effects of fire-related smoke on population health in the Brazilian Amazon. Our empirical strategy is based on a municipality-by-month fixed effects model, coupled with an instrumental variables approach that explores wind direction and smoke in surrounding areas in order to exogenously shift exposure to smoke at the locality. We find that exposure to smoke, measured by PM2.5 concentration levels, is robustly associated with an increase in hospital admissions for respiratory conditions. The effects are higher among children and the elderly, and increase non-linearly with pollution levels. Our benchmark estimates indicate that an increase of one standard deviation in PM2.5 is related to an increase of 1.5% of the monthly hospitalization rate for respiratory conditions. The latter estimate reaches 14% if monthly average PM2.5 crosses thresholds as high as 75µg/m3. We do not observe significant effects on hospitalization rates related to other health conditions nor on mortality rates.

- b. October 2021:** Epidemiology and Psychiatric Sciences. **Inequalities in the prevalence of major depressive disorder in Brazilian slum populations: a cross-**

**sectional analysis** (Pitcairn, C. F. M., Laverty, A. A., Chan, J. J. L., Oyebode, O., Mrejen, M., Pescarini, J. M., Machado, D. B., Hone, T. V.).

This study aims to identify the prevalence and distribution of depression in Brazil and compare mental health inequalities between slum and non-slum populations. Slum residents exhibited lower levels of doctor-diagnosed depression than non-slum urban residents, while reporting similar levels of PHQ-9-screened depression. However, in adjusted regression models, slum residence was associated with a lower likelihood of doctor diagnosed and PHQ-9-screened depression. These results suggest that understanding the mechanisms behind the discrepancy in depression diagnosis between slum and non-slum populations is important to inform health policy in Brazil, including in addressing potential gaps in access to mental healthcare.

- c. August 2021:** The Lancet Regional Health. **The quality of alternative models of primary health care and morbidity and mortality in Brazil: a national longitudinal analysis** (Mrejen, M., Rocha, R., Millett, C., Hone, T.)

This study investigated whether increasing PHC quality in Brazil with highly-skilled health professionals and integrated community health workers (CHWs) was

associated with reductions in hospitalizations and mortality beyond benefits derived from increasing access. Annual municipal-level data for 5,411 municipalities between 2000 and 2014 were analysed using fixed effects panel regressions. Investing in higher-quality PHC models with highly-skilled health professionals and integrated CHWs can deliver reductions in mortality and hospitalizations in LMICs.

- d. June 2021:** The Lancet Global Health. **Effect of socioeconomic inequalities and vulnerabilities on health-system preparedness and response to COVID-19 in Brazil: a comprehensive analysis** (Rocha, R., Atun, R., Massuda, A., Rache, B., Spinola, P., Nunes, L., Lago, M., Castro, M. C.)

Understanding the relationships between health-system preparedness, responses to COVID-19, and the pattern of spread of the epidemic is particularly important in a country marked by wide inequalities such as Brazil. We developed a socioeconomic vulnerability index (SVI) based on household characteristics and the Human Development Index. Descriptive statistics and correlations between state-level indicators were used to characterise the relationship between the availability of health-care resources and socioeconomic characteristics and the spread of the epidemic and the

response of governments and populations in terms of new investments, legislation, and physical distancing. In Brazil, existing socioeconomic inequalities, rather than age, health status, and other risk factors for COVID-19, have affected the course of the epidemic, with a disproportionate adverse burden on more vulnerable states and municipalities, where local government responses and population behaviour have helped contain the effects of the epidemic.

- e. June 2021:** Systematic Reviews. **The impacts of health systems financing fragmentation in low and middle-income countries: a systematic review protocol** (Siqueira, M., Coube, M., Millett, C., Rocha, R., Hone, T.)

The objective of the systematic review described in this protocol was to evaluate and synthesize the evidence concerning the impacts of health systems financing fragmentation in LMICs. Health systems are often fragmented in low- and middle-income countries (LMICs). This can increase inefficiencies and restrict progress towards universal health coverage. Evidence on the impacts of health system fragmentation in LMICs is key for identifying evidence gaps and priority areas for intervention. This knowledge will be valuable to health system policymakers aiming to strengthen health systems in LMICs.



## Published

- f. May 2021:** Science. **Spatiotemporal pattern of COVID-19 spread in Brazil** (Castro, M. C., Kim, S., Barberia, L., Ribeiro, A. F., Gurzenda, S., Ribeiro, K. B., Abbott, E., Blossom, J., Rache, B., Singer, B. H.)

Brazil has been severely hit by COVID-19, with rapid spatial spread of both cases and deaths. We used daily data on reported cases and deaths to understand, measure, and compare the spatiotemporal pattern of the spread across municipalities. Indicators of clustering, trajectories, speed, and intensity of the movement of COVID-19 to interior areas, combined with indices of policy measures, show that although no single narrative explains the diversity in the spread, an overall failure of implementing prompt, coordinated, and equitable responses in a context of stark local inequalities fueled disease spread. This resulted in high and unequal infection and mortality burdens.

- g. March 2021:** Health Economics. **Financing Needs, Spending Projection and the Future of Health in Brazil** (Rocha, R., Furtado, I., Spinola, P.)

In this paper we adopt a growth accounting projection model to estimate and characterize health-financing needs in Brazil as well as to assess the extent to which financing needs may diverge from spending capacity in the future. Institutional reforms and public spending restrictions may leverage public-private segmentation in health financing throughout the next decades, thus potentially leading to losses of equity in the system. Our projections contribute to a scant empirical literature on health financing sustainability in low- and middle-income countries and shed light on the role of spending capacity and institutional constraints over the path towards universal health coverage.

## Articles Accepted for Publication

- h. October 2021:** Journal of Human Capital. **American Delusion: Life Expectancy and Welfare in the US from an International Perspective** (Soares, R. R., Rocha, R., Szklo, M.)

Recent increases in mortality are at the forefront of the public health debate in the US. This paper takes a comparative international perspective and documents the poor relative performance of life expectancy in the US. We characterize its age and cause of death profiles over time and estimate its welfare implications. We show that this poor performance is not recent, not restricted to very particular causes of death, but mostly driven by adults and older ages. We calculate that recent welfare gains could have been 19%-28% higher had the US been able to reproduce the OECD life expectancy performance.

## Submitted and Under Required Review by Journals

- i. October 2021:** Submitted. **The economic burden of overweight and obesity in Brazil: perspectives for the Brazilian Unified Health System.** (Giannichi, B., Resende, B., Paiva, L., Rocha, R., Falbel, F., Rache, B., Adami, F., Rezende, L. F. M., Ferrari, G.)

In this study, we estimated the economic burden of NCDs attributable to overweight and obesity in the Brazilian Unified Health System. We used data from the 2019 Brazilian National Health Survey and the Hospital and Ambulatory Information Systems of the Brazilian Unified Health System. Relative risks for NCDs were retrieved from the Global Burden of Disease study. Along with the increase in the prevalence of obesity in Brazil, an increase in direct health costs related to NCDs is expected. Overweight and obesity account for US\$ 654 million (22%) direct costs of NCDs annually. Effective policies to promote healthy body weight may have economic benefits.

- j. September 2021:** Submitted. **Hiring Mental Health Professionals: Evidence from a Large-Scale Primary Care Policy in Brazil.** (Mrejen, M., Rocha, R.)

This paper assesses the impact of a large-scale national policy (the NASF program), a program that expanded the scope of services provided by Brazil's main primary healthcare program, the Family Health Strategy, integrating mental health services into it. We show that the NASF program had a positive effect on the supply of non-medical health professionals in primary care services and utilization of services delivered by them, but had smaller effects on the supply of specialist physicians for mental health professionals, we document a large impact on the supply of psychologists and occupational therapists, and a smaller impact on the supply of psychiatrists. We do not observe any impacts of the policy neither on mental health-related nor on non-mental health related deaths, hospitalizations and days on sick leave. Together, the results indicate that increasing the supply of more scarce health professionals in primary care settings, like psychiatrists, who have higher wage premiums, might be particularly challenging in primary care services, and that increasing the supply of healthcare professionals in primary care and service utilization might not be enough to improve more extreme mental health outcomes.

## Institutional lines of research in progress

1.

### Regionalization

This project analyzes whether the regionalization process actually took place in the states, whether it resulted in the reorganization of flows and infrastructure to better serve the population, and, ultimately, to what extent this translated into better health outcomes. In view of the tripartite design of the SUS (Brazilian Unified Health System), it is also investigated whether factors related to political economy influence the dynamics of patient flows, that is, the regional functioning of health. In 2022, an edition of “Diálogos IEPS” will be organized to discuss the topic of regionalization and present the results of the Institutional Study. The regional approach will continue to be a priority in the work, advancing research ideas relevant to the regional design of health, such as aspects of political alignment between managers, and regionalization during the COVID-19 pandemic.

2.

### IEPS ID

The project develops an index that summarizes the access and quality of health in a given location, in order to allow comparisons over time and between geographic units (from the municipality, through the health region and macro-region, to the state and national). The index can help communities and managers in a simple and direct way to understand their region's overall health performance and identify challenges and opportunities to improve outcomes for all.

3.

### School Meals

The National Program of School Meals (PNAE) promotes healthy eating in the school environment, by offering meals that cover nutritional needs during the school year. Since 2009, at least 30% of the resources transferred to municipalities must be used to purchase foodstuffs directly from family farms. In this way, the program's mechanism has two main ramifications: for students, to generate an impact on food security and school performance; and to promote local development, through the demand for family farming products. The research assesses the program's impact on local development (eg, household income and food production) and on students' nutritional levels and educational outcomes.

## IEPS Summer Internship

As part of its internationalization actions, IEPS received 4 students from international universities (Harvard University - John F. Kennedy School of Government and Hertie School of Governance), between the months of June and August 2021, who were inserted in IEPS ongoing projects, contributing with their expertise and strengthening their own research capabilities through the interaction with the Institute's team, collaborators and partners.

Based on the work carried out by program members, in January 2022 we launched the Technical Note “Chronic Diseases and Their Risk and Protective Factors: Recent Trends on Vigitel”, which, as main messages, highlighted the worsening in all indicators of chronic diseases during the Covid-19 pandemic and indicated that people with less education are more likely to develop diseases such as hypertension and diabetes. The study had great repercussion in the media, being the basis for articles in mass vehicles such as “G1”, “Folha de S. Paulo”, “Band News”, “O Estado de S. Paulo”, “R7”, “Jovem Pan”, “IstoÉ”, among others.



# ...with the invaluable support of our partners and sponsors

Partnerships between civil society entities strengthen the defense of quality and equity in health. In the midst of the COVID-19 pandemic and the previously existing bottlenecks in public health management, it is increasingly necessary to join forces in solving challenges





## Umane

In July 2021, IEPS and Umane established a partnership to develop projects to support the quality of public management in the area of health. The main focus is Primary Care, the gateway for users of the health system. The work is structured on four fronts: the first is focused on the challenges of managing Chronic Non-Communicable Diseases (NCDs) such as diabetes, obesity, hypertension, heart and respiratory diseases; the second front, health promotion, is centered on public policies that reduce the incidence of behavioral risk factors in the population, such as the consumption of ultra-processed foods and a sedentary lifestyle; the third front seeks to increase the productivity of human resources and improve their distribution; the fourth front aims to eliminate barriers that impede innovation in health policies and identify high-impact policies that can gain national scale. Umane is a non-profit civil association dedicated to supporting, developing and accelerating disease prevention and health promotion initiatives in the field of public health, with the objectives of contributing to a more resolute health system and improving the quality of life of the Brazilian population. Between 1894 and 2016, Umane was in charge of the management of one of the Hospitals of Excellence recognized by the Ministry of Health in Brazil, Hospital Samaritano. After the sale of the hospital, in 2016, an endowment fund was created, in which part of its income is destined to philanthropy, through the support of projects in the field of public health.

## Instituto Çarê

In October 2021, IEPS and Instituto Çarê established a partnership for the realization of the Çarê-IEPS Chair for Racial Studies in Demography and Health. The project's objectives are to (i) generate qualified information and empirical research on racial issues related to health and inequalities in Brazil, in order to qualify and guide the debate on the subject, and provoke social change; and (ii) contribute to the formation of black leaders in applied social research, in particular through technical training and support for their insertion in the academic community and in the public debate on the subject. The project will last for 3 years (2021 to 2024).



## AWS Foundation

The project “Movement of Leaders Connecting Health”, started in November 2021, with the formalization of a partnership between the AWS Foundation and IEPS, and aims to create a network of up to 15 opinion leaders and experts in connected health to discuss the future of digital health and technology in Brazil. The network will have IEPS as a host, responsible for defining the participants and engaging them in a routine of monthly meetings that will follow the Chatham House Rules. The project will last 18 months, with a forecast of 12 network meetings, the production of 2 reports with the main conclusions of the group and 2 webinars on digital health. Research products will be disseminated to different audiences from the IEPS family of media products.



## Instituto Cactus

The project “Political Incidence in Mental Health”, started in October after the formalization of a partnership with Instituto Cactus, and brings the topic of Mental Health to the center of the political debate. The project involves the continuous work of government relations with the Federal Executive and Legislative Powers, the elaboration of diagnoses and recommendations for Brazilian mental health public policies and the construction and execution of advocacy and political incidence strategies for the mental health area.

More specifically, the partnership aims to achieve: (i) qualification of the public debate and expansion of public opinion's understanding of mental health policies and their importance, with a focus on reducing the stigma associated with the topic; (ii) influence over legislative and governmental agendas, and the formulation of public policies on mental health, through the elaboration of the Bill that establishes the National Policy for Psychosocial Care in School Communities (Bill no. 3.408/2021); and (iii) articulation of governmental institutions and non-governmental organizations around the theme.





## Instituto Veredas

The partnership with Instituto Veredas was part of the “2022 Health Agenda” project and focuses on the systematization and translation of scientific knowledge on key topics in the field of health in Brazil. In all, 18 thematic diagnoses were carried out, totaling 465 pages and 564 references used. In addition, experts, researchers, health workers and representatives of social participation were consulted in a survey which resulted in 67 responses and 23 in-depth interviews.



## International Transparency Brazil

The partnership with TI Brazil consisted of producing an extensive report on corruption in Brazilian healthcare management. The document points to flaws in the institutional design, management problems and corruption risks that our system is subject to, the development and vulnerabilities of parliamentary amendments in health, and delves into corruption cases that have had wide media repercussions. In the end, the report points out national and international preventive measures that are proven to be effective in combating illicit actions in health and recommendations to public managers and civil society organizations to mitigate such practices. The document will be pushed in early 2022.



ACT

Atos & Fatos  
ContabilidadeBarbosa  
Müssnich AragãoBrazil Lab  
Princeton University

CEBRI

Climate Policy  
Initiative

CMAP

Columbia Global  
Centers

CONASS



CONASEMS



Conceptu



Data dot



Desiderata

GV Saúde  
FGVHuman Rights  
Watch

IDEC



Igarapé



Imazon

Imperial College  
Londres

Impulso gov

Instituto  
ArapyauInstituto  
República

IPAM



KPMG

Nask Soluções  
TI

NIHR



OCDE



ODD Studio



OPAS-Brasil

Pannunzio, Trezza,  
Donnini Advogados

UFRJ

Trindade  
AdvogadosVital  
Strategies

Wilson Center

# We promoted the debate on health policies

Studies, Technical Notes and other IEPS research were the basis for reports and opinion articles in Brazilian and worldwide press vehicles, contributing to scientific dissemination and public debate on health policies





## National Projection

**600 +**  
**media**  
**inserts**

# Newspaper Folha de S. Paulo

On May 22, the newspaper “Folha de S. Paulo” published an article that detailed the Institutional Study no. 2 of IEPS, “The Impact of 24-hour UPAs on Hospital Indicators and Population Health”. The report assesses, based on research, the impacts of the opening of Emergency Care Units (UPA) in the state of Rio de Janeiro - a pioneering state in this type of action - on a set of indicators, including demand for hospital services, reallocation of hospital resources and population health. The conclusion was that “the opening of about 70 UPAs in Rio de Janeiro, between 2005 and 2016, may have expanded the area of health care to half the population of Rio de Janeiro, but was not associated with a significant decrease in health indicators such as mortality and hospitalizations of serious cases in the state”, as the report details.



# TV Network CNN Brasil

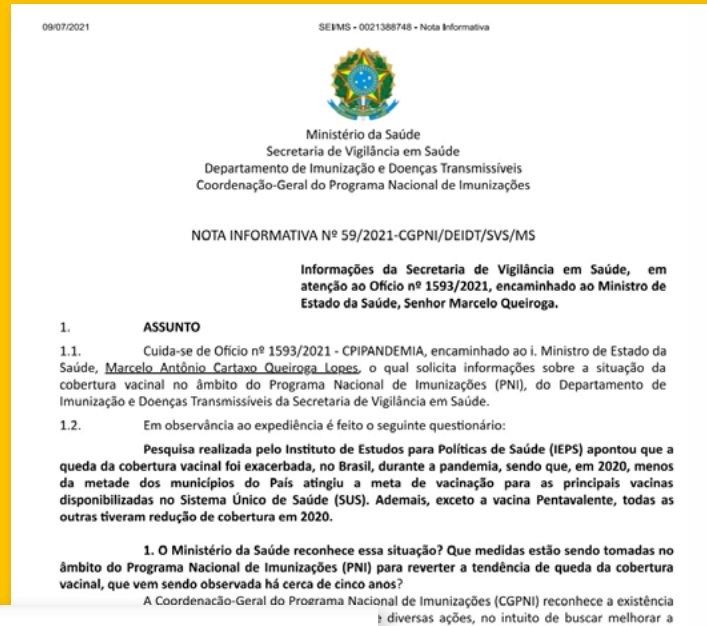
On June 19, the broadcaster “CNN Brasil” published a report on how social inequality contributed to accelerating the number of deaths due to COVID-19 to the half million mark in Brazil. The report mentions the IEPS research “Effect of socioeconomic inequalities and vulnerabilities on health system preparedness and response to COVID-19 in Brazil: a comprehensive analysis”, published in April in the journal *Lancet*. “When the pandemic emerged, the age issue seemed to determine a clear risk profile. Over time, we began to see a pattern in which the disease, instead of spreading to places with older age groups, became a bigger problem in socially vulnerable places, regardless of the presence of older people”, said Rudi Rocha, director of research at IEPS.





## UOL news site

On July 15, columnist Rubens Valente, from UOL, reported that the Ministry of Health admitted to the COVID-19 Parliamentary Committee of Inquiry (CPI) the drop in the vaccination rate against several diseases. This drop was previously revealed, first-hand, by the study “Panorama of Vaccination Coverage in Brazil, 2020”, Panorama IEPS n. 1. The Ministry’s statement on the matter took place, via the general coordination of the PNI (National Immunization Program) of the Health Surveillance Secretariat, after a request from Senator Humberto Costa, a member of the CPI, who asked the Ministry about the research carried out by IEPS.



Campanha de vacinação na cidade de Santos (SP)

Imagem: Fabrício Costa/Futura Press/Estadão Conteúdo

### REPORTAGEM

## Ministério admite à CPI queda geral de vacinação contra outras doenças



Rubens Valente  
Colunista do UOL  
15/07/2021 12h40

depende de uma ação coordenada entre todos os setores de imunizações desta Secretaria de Vigilância em Saúde, uma contínua comunicação com a imprensa, o rádio, jornal, internet, cartazes etc.), no qual inclusive com a participação do personagem já conhecido sobre a importância da vacina seja de livros possíveis, além dos formadores de opinião, e os responsáveis, bem como toda a sociedade de

Ministério da Saúde, dos pesquisadores e das entidades envolvidas. A queda da cobertura vacinal é uma preocupação dos pesquisadores, médicos e acadêmicos na área de imunizações, servindo como fontes de informações para as organizações e entidades médico-científicas nas áreas de imunizações e de saúde pública. O exemplo dos integrantes das Câmaras Técnicas de Saúde, que comumente traz em sua formação, experts na

ao\_origem=avore\_visualizar&id\_documento=23305391&tra\_u... 1/9

## Newspaper O Estado de S. Paulo

On October 30, the newspaper “O Estado de S. Paulo” published a special section about the “Summit Saúde Brasil 2021”, an event of lectures and debates on the future of health in the country, which took place between the 18th and 22nd of October, organized by the newspaper. In the special section, a full-page interview with the founder of IEPS, economist and former president of the Central Bank Arminio Fraga, who opened the “Summit Saúde 2021” with the lecture “Paths to the Health System”. “We have an underfunded healthcare system. What can be seen is that public health has not been a priority: the questions of how much and how to spend are not part of the public debate about what to do with our money”, said Arminio Fraga.



On November 22, the newspaper “O Estado de S. Paulo” published a report on the federal budget for health in 2022, based on IEPS Technical Note No. 23, “The Budget Proposed for Health in 2022”. According to the IEPS study, excluding spending to combat the COVID-19 pandemic, the budget fell to R\$140.3 billion, the lowest since 2012. The value corresponds to 3.1% of total government resources, the lowest percentage in a decade.





# Brasil 247, Exame, iG, IstoÉ, Nexo, Poder 360, TV Cultura e Zero Hora

After the publication, by the newspaper “O Estado de S. Paulo”, of the report on Technical Note No. 23 “The Budget Proposed for Health in 2022”, other vehicles also mentioned the report, including “Brasil 247”, “Exame”, “iG”, “IstoÉ”, “Nexo”, “Power 360” and “Zero Hora”. “TV Cultura” also produced a report, with an interview by the director of public policies at IEPS, Arthur Aguillar, to “Jornal da Tarde”, the broadcaster’s news program.



Marcelo Queiroga e Jair Bolsonaro (Foto: Fabio Rodrigues Pozzebom/Agência Brasil)

Apoia o 247 Google News ICL

**247** - De acordo com análise do Instituto de Estudos para Políticas de Saúde (IEPS), os recursos previstos para a Saúde em 2022 são os menores desde 2012.

Segundo levantamento, os valores propostos para o ano que vem podem prejudicar diretamente a capacidade de investimentos na área e são insuficientes para manter os serviços da Atenção Primária, considerada a principal porta de entrada para o SUS (Sistema Único de Saúde).

A análise foi feita com base no Projeto de Lei Orçamentária apresentado pelo governo Bolsonaro e levaram em conta a previsão de recursos sem os valores destinados a Covid. O orçamento da Saúde em 2022 será de R\$ 140 bilhões, “valor substancialmente menor à proposta de orçamento de todos os anos entre 2012 e 2021”.



PODER360

18.nov.2021 (quinta-feira) - 11h43

Os recursos previstos para o Ministério da Saúde em 2022 são os menores desde 2012. Os gastos com a área estagnaram nos últimos 10 anos, e os valores propostos para o ano que vem podem prejudicar diretamente a capacidade de investimentos da Saúde, além de serem insuficientes para manter os serviços de Atenção Primária, considerada a principal porta de entrada para o SUS (Sistema Único de Saúde).

## Newspaper O Estado de S. Paulo



On November 11, the newspaper “O Estado de S. Paulo” published, exclusively, the two-page report on Institutional Study No. 4 of IEPS, “Health in the Legal Amazon: Recent Evolution and Challenges in a Comparative Perspective”, by IEPS research director Rudi Rocha. In the report, the newspaper details how the lack of access to health services, caused

by long distances and the scarcity of professionals and resources in basic units and hospitals, contributes to life expectancy in the Legal Amazon being lower than the Brazilian average. “Health in the region is lagging behind. If there’s one place where Primary Care has to be the best in Brazil, it’s the Legal Amazon,” said Rudi Rocha.



## International Repercussion

### Associated Press News Agency

On February 25, Brazil reached the mark of 250 thousand deaths officially registered as a result of COVID-19. The news agency “Associated Press” interviewed the political scientist and executive director of IEPS, Miguel Lago. “Brazil simply did not have a response plan. There is simply no plan,” Miguel said. Still in the report, Lago noted that Bolsonaro rarely comments on the pandemic, changing his priorities. The report was reproduced in more than 20 vehicles in countries such as Australia, Canada, United States, India and Maldives.



### BBC News website

On February 26, the Spanish-language version of the BBC’s website published a story on how the COVID-19 vaccination brought corruption and lack of planning to the surface. In an interview, IEPS political scientist and executive director Miguel Lago said:

*“It is a matter of external dependence, but this dependence is also Latin America’s fault: we do not have the capacity to produce these vaccines, while India or China, which were at the same level as Brazil in this area 30 years ago, are already able to produce them on a large scale”*







French newspaper Le Monde

On March 17, the French newspaper “Le Monde” reported the departure of General Eduardo Pazuello from the Brazilian Ministry of Health and the announcement of Marcelo Queiroga as the new minister, the fourth since the beginning of the pandemic. In the meantime, Brazil reached the mark of 280 thousand deaths officially registered as a result of COVID-19. In the news report, the executive director of IEPS, Miguel Lago highlights how the frequent exchange of appointed ministers exposed the lack of planning and coordination in the fight against the coronavirus.



Magazine and website National Geographic

IEPS Panorama no. 1, on vaccination coverage, had international impact in 2021. An article published on the website of the magazine “National Geographic”, on June 28, seeks to analyze the reasons behind the general reduction in vaccination rates in Brazil in the last 5 years.



Al Jazeera Network

On February 9, Brazil reached the mark of 600 thousand deaths officially registered as a result of COVID-19. The Arab broadcaster “Al Jazeera” classified the number as a “Terrible Record”. Miguel Lago, executive director of IEPS, was interviewed in the news report, reproduced in press vehicles in at least 15 different countries.

Op-eds Articles

Seven opinion pieces in Brazilian newspapers and one in an international newspaper

The strategic role of municipalities in the future of SUS (Brazilian Unified Health System)

February, 10th  
O Estado de S. Paulo

In the article “The strategic role of municipalities in the future of SUS”, published on February 10 in the newspaper “O Estado de S. Paulo”, the founder of IEPS, economist Arminio Fraga, executive director of IEPS, political scientist Miguel Lago, and the IEPS research director, economist Rudi Rocha, stated that the COVID-19 pandemic had revealed the urgent need for a review of the role of the State and public policies in the area of health, and that the actions of municipalities can be fundamental in this change.





How Many Lives Fit into a Vote?

April 5th - Folha de S. Paulo



América Latina, es momento de trabajar juntos para vencer la pandemia

February, 16th  
The New York Times

In the article “Latin America, it’s time to work together to win the pandemic”, on February 16, in the Spanish version of the website of the American newspaper “New York Times”, the executive director of the IEPS, Miguel Lago, stated that, in order to control the virus, the region needed to address inequalities and strengthen cooperation as a regional bloc. Otherwise, it would fall further behind in the vaccination process.

In the article “How many lives fit in a vote?”, published on the website of the newspaper “Folha de S. Paulo” on April 5, authors Beatriz Rache, Fernando Falbel, Miguel Lago and Rudi Rocha detailed IEPS Technical Note No. 18, on the extent to which the acceleration of mortality from COVID-19, throughout the first quarter of 2021, was influenced by the speech of the President of the Republic. The text highlights that mortality accelerated exactly in the states and municipalities that most voted for Bolsonaro in 2018, where social distancing has been lower.

The color of priority

June 10th  
O Globo

In the article “The Color of Priority”, published in the newspaper “O Globo”, on June 10, IEPS researchers Helyn Thami, Fernanda Leal and Jéssica Remédios addressed the fair distribution of vaccines against COVID-19. In the text, the authors detail that the distribution of vaccines to the poor and blacks is still a challenge in Brazil, since this part of the population becomes “invisible” in the midst of gaps in public health policies.





# Infodemic, the other pandemic we face

July 20th  
O Estado de S. Paulo

In the article “Infodemia: the other pandemic we face”, published in the newspaper “O Estado de S. Paulo”, on July 20, the then IEPS researcher Helyn Thami, the IEPS government relations specialist, Rebeca Freitas, and the IEPS management manager, Cristina Franceschini, made an analysis of the disinformation environment that has taken over the country amid the politicization of the COVID-19 pandemic. The authors claim that the spread of unscientific and erratic discourse increases the risk of deaths and call for initiatives to better understand the infodemic.



# The Executive’s lack of transparency can worsen our health situation

August 3rd  
Congresso em Foco



In the article “The Executive’s lack of transparency can worsen our health situation”, published on the website “Congresso em Foco”, specialized in political coverage, on August 3, the executive director of IEPS, Miguel Lago, the IEPS director of public policies, Arthur Aguillar, and the IEPS specialist in government relations, Rebeca Freitas, warned about the attempt made by the federal government to create obstacles for the population to access information on health in general, which could worsen Brazil’s response to the pandemic.

# Rio at the forefront against childhood obesity

August 8th  
O Globo

In the article “Rio at the forefront against childhood obesity”, published in the newspaper “O Globo” on August 8, the economist and founder of IEPS, Arminio Fraga, chef Rita Lobo and the founder of the Desiderata Institute, Guilherme Frering, state the importance of the approval, in the first vote in the City Council of Rio de Janeiro, of Bill no. 1,662/2019, on the ban on sales of ultra-processed products and sugary drinks in schools.



ARTIGO

## Rio na vanguarda contra a obesidade infantil

ARMÍNIO FRAGA,  
GUILHERME FRERING  
E RITA LOBO

O enfrentamento da obesidade na infância e na adolescência, tema debatido no mundo todo, pode ter no Rio de Janeiro um exemplo para o país. A Câmara dos Vereadores do município aprovou em primeira discussão o Projeto de Lei (PL) 1.662/2019, que, se aprovado em definitivo, fará da cidade modelo para o Brasil e para a América Latina. O texto proíbe a venda de produtos ultraprocessados e bebidas açucaradas nas escolas.

A obesidade infantil é um problema crescente. Na Região Sudeste, segundo dados do Ministério da Saúde, o excesso de peso na infância atingiu em 2018 quase 40% dessa população. No Rio, dados do Panorama da Obesidade em Crianças e Adolescentes do Instituto Desiderata mostram que 30,2% das crianças de 5 a 9 anos apresentam excesso de peso em 2019.

A obesidade é fator de risco para o desenvolvimento de doenças crônicas não transmissíveis, hoje responsáveis por 71% do total de mortes no mundo, segundo a Organização Mundial da Saúde (OMS). Conter essa epidemia silenciosa exige iniciativas desde cedo. No caso da alimentação, especial atenção ao consumo de produtos ultraprocessados. Estudos comprovaram que esses alimentos, produzidos com aditivos quími-

cos, como conservantes e aromatizantes, trazem riscos à saúde ao substituir a comida de verdade. O Guia Alimentar para a População Brasileira, que orienta os profissionais da saúde, recomenda que se evite o consumo desses produtos — como salgadinhos de pacote e bebidas açucaradas.

Mesmo com o entendimento de que a alimentação saudável é fundamental, não é fácil garantir comida de verdade em todas as refeições. Por isso é tão importante essa iniciativa dos vereadores do Rio. O PL aborda o outro espaço que demanda atenção especial: as escolas. Crianças e adolescentes permanecem nelas por um longo período do dia, e cerca de 200 dias do ano. Ali consomem de uma a duas refeições no horário letivo — 30% a 50% de sua ingestão diária. Nas particulares, 30% das calorias consumidas por crianças e adolescentes vêm de ultraprocessados. E, nas públicas municipais do Rio, em 2020, 61% das refeições continham esses produtos.

O PL viabiliza a transformação das escolas em espaços saudáveis, liberando-as dos alimentos ultraprocessados e das bebidas açucaradas. Numa tacada, a implementação da lei melhoraria a alimentação de mais de 1 milhão de pessoas, reduzindo sobrepeso e

obesidade entre crianças em idade escolar, sem aumentar em 1 centavo o gasto público. Segundo estudo do Instituto de Estudos para Políticas de Saúde (Ieps), preparos mais saudáveis podem apresentar um custo menor que as opções ultraprocessadas e até permitir economia na compra de alimentos, a depender do cardápio selecionado. A proibição da venda desses alimentos não prejudicaria o emprego nem renda dos cantineiros escolares. Informações sobre o PL e sobre como apoiar sua aprovação estão no site da campanha “Quem quer prevenir a obesidade infantil, levanta a mão!”.

O PL atraiu atenção multipartidária. Capitaneado por Cesar Maia (DEM-RJ), o texto é da autoria de 15 vereadores e foi assinado por outros 14, de 11 partidos diferentes. Nessa primeira votação, obteve 75% dos votos dos presentes, indicando que pelo menos 30 representantes cariocas estão conectados com o tema. O PL aguarda agora a segunda votação, prevista para as próximas semanas. Basta que os mesmos vereadores repitam seu voto e que o prefeito sancione o projeto para que o Rio de Janeiro se transforme em exemplo de liderança num dos temas mais prementes da sociedade contemporânea.

**Arminio Fraga**, economista e ex-presidente do Banco Central, é fundador do Instituto de Estudos para Políticas de Saúde (Ieps). **Guilherme Frering** é fundador do Instituto Desiderata. **Rita Lobo** é chef, fundadora do Panvelha e apresentadora do GNT.

**Dia dos Pais:** O ator Jonathan Azevedo revela sua rotina com o filho de 1 ano

**O GLOBO**

**A Bahia é dourada**

**ô, pai, ô**

**CRIME ORGANIZADO**

**Violência brutal de facções cria refugiados urbanos no Nordeste**

Comunidades vivem disputas de territórios e escalada dos homicídios

**SEGUNDO CADERNO**

**Scr, Mn! Tlg?\***

**LIRA E PACHECO**

**seguem caminhos dílicos na crise**

**MISSÃO: DESEMPENAR**

**COMO COMBATER AS DORES DO ISOLAMENTO**



# Health policies adrift: the importance of Vigitel in 2021, according to Aguillar and Freitas

October 18th  
Poder 360

In the article “Health policies adrift: the importance of Vigitel in 2021, according to Aguillar and Freitas”, published on October 18 on the website “Poder 360”, the IEPS director of public policies, Arthur Aguillar, and the IEPS specialist in government relations, Rebeca Freitas, warned of the risk of discontinuation of the main source of information that helps in the fight against Chronic Non-Communicable Diseases (NCDs) in Brazil, Vigitel, the Telephone Surveillance of Risk Factors and Protection for Chronic Diseases. In the country, NCDs are the main cause of death for Brazilians: they account for more than 7 out of 10 deaths.

**PODER 360**

“ opinião

## Políticas de saúde à deriva: a importância do Vigitel em 2021, escrevem Aguillar e Freitas

Letalidade da covid e repasse de consultas para portadores de DCNTs tornam a realização do Vigitel ainda mais urgente



Atendimento no HIRAN, hospital público em Brasília

**ARTHUR AGUILLAR e REBECA FREITAS**  
18.out.2021 (segunda-feira) - 9h50

**A**s Doenças Crônicas Não Transmissíveis (DCNTs) são a principal causa de morte dos brasileiros: respondem por mais de **7 em cada 10** óbitos no país.



# Media Map

IEPS was featured around the world

## ARGENTINA

La Nación

## AUSTRALIA

Canberra

## CANADA

CBC  
The Globe and Mail  
Toronto Star

## FRANCE

Le Monde

## GERMANY

Deutsche Welle  
N-TV

## GUATEMALA

El Periódico

## HONG KONG

South China Morning Post

## INDIA

The Hindu

## INDONESIA

CNBC

## IRELAND

Irish Examiner

## NEW ZEALAND

New Zealand Herald

## QATAR

Al Jazeera

## SAUDI ARABIA

Arab News

## SENEGAL

BBC Africa

## UNITED KINGDOM

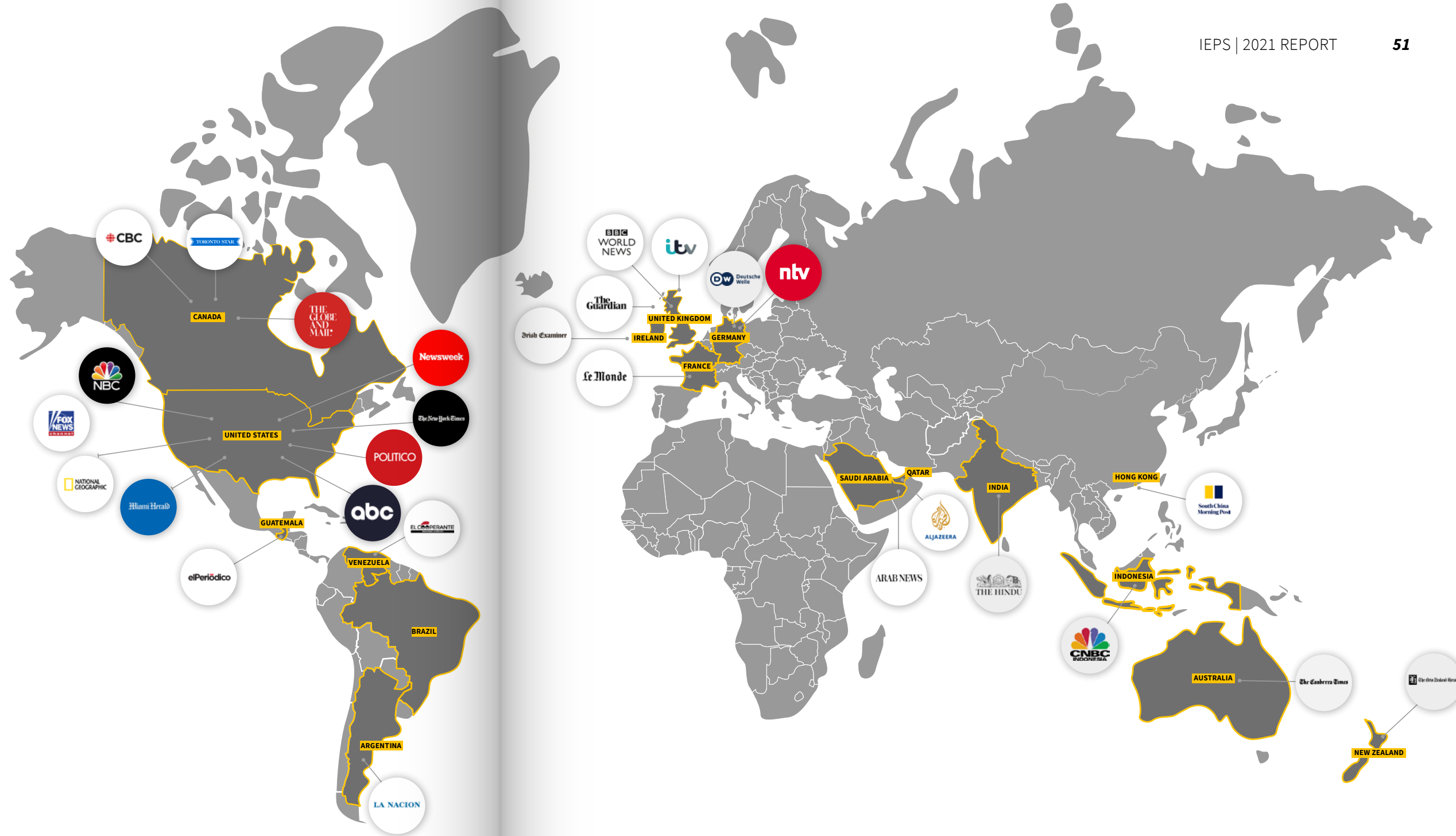
BBC News  
iTV  
The Guardian

## UNITED STATES

ABC  
FOX  
Miami Herald  
National Geographic  
NBC  
Newsweek  
Politico  
The New York Times

## VENEZUELA

El Cooperante



## Partner channels

### Blog Saúde em Público

Folha de S. Paulo

The blog “Saúde em Público” is a space hosted by the newspaper “Folha de S. Paulo” dedicated to the voices of health specialists. The blog is a free forum that discusses successful experiences and possible paths, bringing data to support a broad discussion on health policies. In 2021, several topics were addressed in 43 texts on the platform, such as Chronic Non-Communicable Diseases, COVID-19, human resources in health, health of the black population, health innovation, SUS management, mental health, among others.



## Website Nexo Políticas Públicas

The partnership between IEPS and Nexo Public Policies allows the elaboration of analytical content on health, such as: 1) **Glossaries** of terms little known by the general public; 2) **Timelines** of health policies; 3) **Ask a Researcher**, which invites experts to discuss relevant health issues; 4) **Questions Science Has Answered**, disseminating scientific evidence to answer common health questions; 5) **Opinion**, a section of articles on the IEPS view on topics with wide media repercussions and, finally, 6) **Data**, a quantitative product with graphs, tables and analysis of health data.





# Weekly column

## A Hora da Ciência na CPI

April to October  
O Globo

Twenty-two articles were written by the political scientist and executive director of IEPS, Miguel Lago, and published every Saturday in the newspaper “O Globo” during the COVID-19 Parliamentary Committee of Inquiry (CPI) period. The column “Hora da Ciência na CPI” analyzed, through extensive scientific surveys, the relevant themes of the week which were debated in the Committee (herd immunity, early treatment, vaccine effectiveness, advertising campaigns in the pandemic, etc.), bridging the gap between science and politics

**ECOS DA CRISE SANITÁRIA**

## A política embaça a ciência na 1ª semana da CPI

Tema central dos debates, tratamento precoce foi apresentado ao espectador da comissão com argumentos pró e contra aparentemente equivalentes. Na realidade, remédios sucumbiram ao rigor de pesquisas 'padrão ouro'

**A HORA DA CIÊNCIA NA CPI**

MIQUELL LAGO\*  
COORDENADOR GERAL DO IEPS

**E** começaram a CPI da Covid. Na terça-feira, o senador Luiz Carlos Heinze (PP-RS) abriu sua fala dirigindo-se ao ex-deputado federal e ex-ministro da Saúde Luiz Henrique Mandetta (DEM-MG): "Infelizmente, é uma CPI política". O parlamentar sugeriu que a comissão estaria muito mais baseada nas divergências políticas do que em fatos concretos. Os debates deixam claro as falsas equivalências criadas pela política quando se resolve que as controvérsias científicas.

Praticamente um tempo depois os membros da comissão dirigiu ao ex-ministro argumentos em defesa do chamado "tratamento precoce". Os membros governistas Eduardo Gleide (Demom-CE), Rogério Melo (PL-SC), Ciro Nogueira (PP-PJ), Marcos Rogério (DEM-RO) e Helcio foram todos enfáticos em suas defesas — ora recorrendo a experiências pessoais, ora a re-

latos de médicos, ou ainda a estudos pouco seguros. Para o espectador da CPI, argumentos pró e contra o tratamento precoce são apresentados de forma relativamente bem distribuída, dando a impressão de que existe uma equivalência entre as posições.

Na ciência, no entanto, essa controvérsia é infinitamente menor e o assunto muito mais consensual. Em um ano de intensa produção acadêmica, até agora nenhuma pesquisa "padrão ouro" "prémio que existem remédios que previnem a infecção ou o desenvolvimento da doença, e que a maioria dos estudos de 196 estudos clínicos, com mais de 70 mil pacientes, conclui que hidroxicloroquina e ivermectina não parecem afetar positivamente os desfechos de saúde.

Comparar a eficácia de um medicamento requer métodos científicos rigorosos, como: a) grupos de controle — grupos de voluntários recebem o medicamento e outro esquema terapêutico — alterando-se apenas uma variável; b) randomização — voluntários são incluí-

**VACINA: O ÚNICO 'TRATAMENTO PRECOCE' COMPROVADO**

**Incidência de Covid 19 14 dias após 2ª dose**

**Resolução de sintomas**

**Mortalidade**

**Fonte:** (1) Paton et al. (2021); (2) López Medina et al. (2021); (3) Henry et al. (2020)

**Elaboração:** Beatriz Rocha

**Luz científica na análise política**

➤ Apesar de hoje o GLOBO possa apadrinhar a seção "Hora da Ciência na CPI" com uma leitura assustosa das principais temáticas em pauta, o ponto de partida é a ciência. A ciência é a base para qualquer política pública. A ciência é a base para qualquer política pública. A ciência é a base para qualquer política pública.

**6 | País**

**ECOS DA CRISE SANITÁRIA**

## A postura do Itamaraty e a propagação do vírus

Uma pandemia exige enfrentamento conjunto entre países e enfatiza o conceito de saúde global — o vírus não respeita fronteiras, mas a política externa brasileira refutou ações coordenadas. Covid escancarou iniquidade entre as nações

**A HORA DA CIÊNCIA NA CPI**

MIQUELL LAGO\*  
COORDENADOR GERAL DO IEPS

**O** dependente do ex-ministro das Relações Exteriores Ernesto Araújo exibe livre o quanto a política externa deste governo dificulta a aquisição de insumos fundamentais para enfrentar a crise sanitária em nosso país. Foi detestado de lado, no entanto, o impacto dessa mesma política externa na propagação do vírus em escala global.

O conceito de saúde global enfatiza o princípio da interdependência da saúde da população do planeta. As fronteiras nacionais não existem, por exemplo, a circulação de doenças transmissíveis. Nenhum país sozinho é capaz de enfrentar todos os desafios de saúde que o afetam. Um exemplo emblemático mais atualizado ocorreu em 2003, quando três governos entraram na Nigéria suspenderam a vacinação contra poliomielite por razões políticas. A consequência foi um surto global de pólio que afetou 20 países e foi responsável

**PAÍSES MAIS RICOS IMUNIZAM MAIS**

População completamente imunizada (%)

África	0,5
América Latina	2,4
União Europeia	13,8
Reino Unido	30,7
EUA	37,5

**Fonte:** Our World in Data

**Elaboração:** por Beatriz Rocha e Fernando Fátal

**Elaboração:** Beatriz Rocha

por 80% dos casos de pólio no mundo suscetíveis. No contexto de uma pandemia global isso fica ainda mais claro. Um país como o Peru, que foi o primeiro no continente a declarar um lockdown nacional ainda em março de 2020, é hoje assolado pela P. Variante de Manaus, consequência da falta de responsabilidade da falta de responsabilidade dos governos em lidar com a pandemia. Hoje, 40% dos casos em Lima são variante brasileira.

A pandemia também ilustra a tremenda iniquidade existente na saúde global. O acesso à saúde tem se dado mediante à capacidade de pagamento dos países. A corrida por produtos estratégicos de saúde (respiradores, EPIs, vacinas) levou os países desenvolvidos a acumular mais do que precisavam, deixando desprovidos os países em desenvolvimento.

A diplomacia da saúde em âmbito multilateral — ONU, OMS e OMC — é o instrumento para mitigar

os poucos esses desequilíbrios. De concreto, surgiu uma das propostas mais diretas: a criação do mecanismo Covax — que prevê uma distribuição de vacinas para evitar que nenhum país fique sem vacinar — e a quebra temporária de patentes para insumos relacionados à produção. Cabe ressaltar que nenhuma dessas ações garante doses para que todos os países do mundo tenham acesso à vacina.

Em um mundo, porém insuficiente. No que tange à ciência, não há consenso na comunidade científica, e destacados cientistas têm ponderado que a medida traz riscos de desfechos de controle de qualidade e transferência de tecnologia. Não obstante, elas completam iniciativas importantes para compensar os enormes desequilíbrios da saúde global.

**MUDANÇA DE PARADIGMA**

O Itamaraty se posiciona contrariamente a essas iniciativas, assim como tem se posicionado de maneira conflituosa junto à Organização Mundial de Saúde. O Brasil sequer foi capaz de aderir a uma resolução da ONU contra a propagação de fake news sobre vacinas. Somos o único país em desenvolvimento que vota contra os interesses dos demais países em desenvolvimento, contribuindo para se amplifique as desigualdades na saúde global.

Nossa posição também tem mudado drasticamente desde que o presidente dos Estados Unidos, Joe Biden, anunciou se favorável à discussão de quebra de patentes. Ele mostra compreensão da lógica da saúde glo-

bal: enquanto todos os países não estiverem imunizados, uma população tão pouco o estará de maneira sustentável.

Ernesto Araújo foi embora, mas a política externa mudou pouco. O Itamaraty já foi motivo de orgulho para o país, inclusive nesse tema. O Brasil era visto como uma liderança na busca por maior equidade na saúde global. Essa política de saúde foi construída ao longo de décadas por gerações de servidores públicos foi espartada por uma política de governo atenta da construção ideológica extrema de alguns embalsamadores.

É necessário, portanto, que nossos senadores cessem de atribuir problemas apenas às pessoas e comecem a responsabilizar seriamente as instituições. É necessário avaliar o papel desempenhado pelo Itamaraty no aprofundamento de nossa crise sanitária e na contribuição para a propagação do vírus em nível global.

(\*) Miguel Lago é diretor-geral do IEPS e professor adjunto da Universidade de Columbia (EUA). A "Hora da Ciência na CPI" é uma parceria entre o IEPS e O GLOBO com uma análise semanal de debates com base a luz da ciência.





## Diálogos IEPS

05.11 - #1

### Are UPAs Good for Health? How Emergency Care Units (UPAs) impact hospital performance and population health - [link](#)

The first edition of the “Diálogos IEPS” was held on 11 May. Marking the debut of the Institute’s new series of seminars, the panel of debaters included the participation of Rudi Rocha, IEPS director of research; Letícia Nunes, researcher at IEPS; and Ricardo de Oliveira, former Secretary of Health of Espírito Santo. The mediation was performed by journalist Ricardo Gandour. The webinar discussed IEPS Institutional Study no 2, “The Impact of 24h UPAs on Hospital Indicators and Population Health”, and marked the launch of “Olhar IEPS”, the Institute’s policy brief. The event had repercussions in the newspapers “Folha de S. Paulo” and “O Estado de S. Paulo”.



Rudi Rocha



Letícia Nunes



Ricardo de Oliveira

07.28 - #2

### Chronic Non-Communicable Diseases: Why do lines of care in Brazil still belong to the world of fiction? - [link](#)

The second edition of the “Diálogos IEPS” was held on July 28 in partnership with Umane - a non-profit civil society association focused on health promotion. The webinar was the first of two debates, in a row, that addressed Chronic Non-Communicable Diseases. Jéssica Remédios, public policy researcher at IEPS; Luciana Sardinha, technical advisor for public health and epidemiology at Vital Strategies; Marco Aurélio Georg, municipal coordinator of care integration in Blumenau/SC; Thais Junqueira, CEO of Umane; and Miguel Lago, executive director of IEPS, made up the debate panel. The event, which was covered by the newspaper “Folha de S. Paulo”, was mediated by journalist Ricardo Gandour and detailed the study “Lines of Care for Chronic Noncommunicable Diseases in Primary Health Care”, the second research in the series “Panorama IEPS”.

Jéssica  
RemédiosLuciana  
SardinhaMarco Aurélio  
GeorgThais  
JunqueiraMiguel  
Lago

09.01 - #3

### Chronic Non-Communicable Diseases: How to address bottlenecks in the implementation of Lines of Care for Chronic Noncommunicable Diseases in Primary Health Care? - [link](#)

The third edition of the “Diálogos IEPS” was held on September 1st, again in partnership with Umane. The event was the second in a row on the impacts of Chronic Noncommunicable Diseases on health. The debate panel included Patrícia Jaime, professor at the Department of Nutrition at the University of São Paulo (USP) and vice-coordinator of the Center for Epidemiological Research in Nutrition and Health (NUPENS); Michael Duncan, technical advisor to the Municipal Health Department of Rio de Janeiro; Arthur Aguillar, director of public policy at IEPS; and Evelyn Santos, project coordinator at Umane. The webinar was mediated by journalist Ricardo Gandour and detailed the study “How to address the bottlenecks in the implementation of the Lines of Care for Chronic Non-Communicable Diseases in Primary Health Care”, the second in the “Olhar IEPS” series.



Michael Duncan



Patrícia Jaime



Evelyn Santos



Arthur Aguillar



→ In the two Diálogos IEPS about NCDs, two videos were produced, each referring to a webinar, summarizing in a few minutes (i) seven causes that prevent the efficient implementation of the lines of care for chronic non-communicable diseases (NCDs) ([link](#)) and (ii) seven paths for the implementation of NCD Lines of Care ([link](#)). The videos will be published in 2022 on social networks and on the new IEPS website. In addition, the videos were used in classrooms.

10.26 - #4

## How is mental health doing in Brazil?

Evolution, inequalities and access to treatment - [link](#)

The fourth edition of the “Diálogos IEPS” was held on October 26. The Institute released the unprecedented study “How is mental health doing in Brazil? Evolution, inequalities and access to treatments”, led by health economics researcher Matías Mrejen and co-authored by the Institute’s research director, Rudi Rocha. The survey was the third in the “Olhar IEPS” series and opened the Institute’s public health agenda focused on mental well-being. The panel was attended by Magda Dimenstein, professor at the Graduate Program in Psychology at the Federal University of Rio Grande do Norte (UFRN); Luciana Barrancos, general manager of Instituto Cactus; and Daniel Elia, psychosocial care coordinator at the Rio de Janeiro State Health Department. The mediation was performed by journalist Ricardo Gandour.

Matías  
MrejenDaniel  
EliaMagda  
DimensteinLuciana  
BarrancosRudi  
Rocha

12.15 - #5

## Pandemic, social participation and health policies for the black population - [link](#)

The fifth and final “Diálogos IEPS” of 2021 was held on December 15th. With the theme “Pandemic, social participation and health policies for the black population”, the webinar brought together Luana Araújo, an infectious disease doctor from the Federal University of Rio de Janeiro (UFRJ), PhD in Public Health from Johns Hopkins and consultant at Hospital Albert Einstein; Ionara Magalhães, Associate Professor at the Federal University of Recôncavo da Bahia (UFRB), member of the State Technical Committee on Health of the Black Population and of the Racism and Health WG of the Brazilian Association of Collective Health (ABRASCO); Edna Araújo, PhD in Public Health from the Federal University of Bahia (UFBA) and coordinator of the Racism and Health WG at ABRASCO; and Maria Letícia Machado, public policy researcher at IEPS. The mediation was performed by journalist Ricardo Gandour. Three axes guided the “Diálogos IEPS” on the health of the black population: balance of the impact of the pandemic and expectations for the future; the role of social participation in promoting equity in the health sector; and challenges for scaling up the National Policy for the Comprehensive Health of the Black Population (PNSIPN) in Brazilian municipalities, possible implementation paths, incentives and indicators to monitor it.

Luana  
AraújoEdna  
AraújoIonara  
MagalhãesMaria Letícia  
Machado

## Other Events

### Brazilian Social Sciences in the Pandemic

(in partnership with Brazil Lab/Princeton University)

04.15 - Panel 1

### Social Inequalities in the face of the Pandemic - [link](#)

The webinar “Social inequalities in the face of the pandemic” was the first of four panels to discuss the role of social sciences in the pandemic, and was attended by José Ricardo Ayres, professor in the Department of Preventive Medicine at the Faculty of Medicine of the University of São Paulo (USP); Márcia Lima, professor

at the Department of Sociology at USP and senior associate researcher at the Brazilian Center for Analysis and Planning (CEBRAP), where she coordinates the Center for Research and Training in Race, Gender and Racial Justice (AFRO-CEBRAP); Miguel Lago, executive director of IEPS; Miqueias Mugge, historian and researcher at the Brazil Lab in Princeton; and Patrice Schuch, professor of anthropology at the Federal University of Rio Grande do Sul (UFRGS) and director of the



Brazilian Association of Anthropology. In the debate, the experts highlighted that, although Brazil has, over the last decades, increased access to universities and reduced functional illiteracy, the country has not managed to correct the historical inequalities of race and gender. These distortions have contributed, according to the researchers, to the socioeconomic impacts of COVID-19 being felt more by women and blacks, whose average income is well below that of white men.



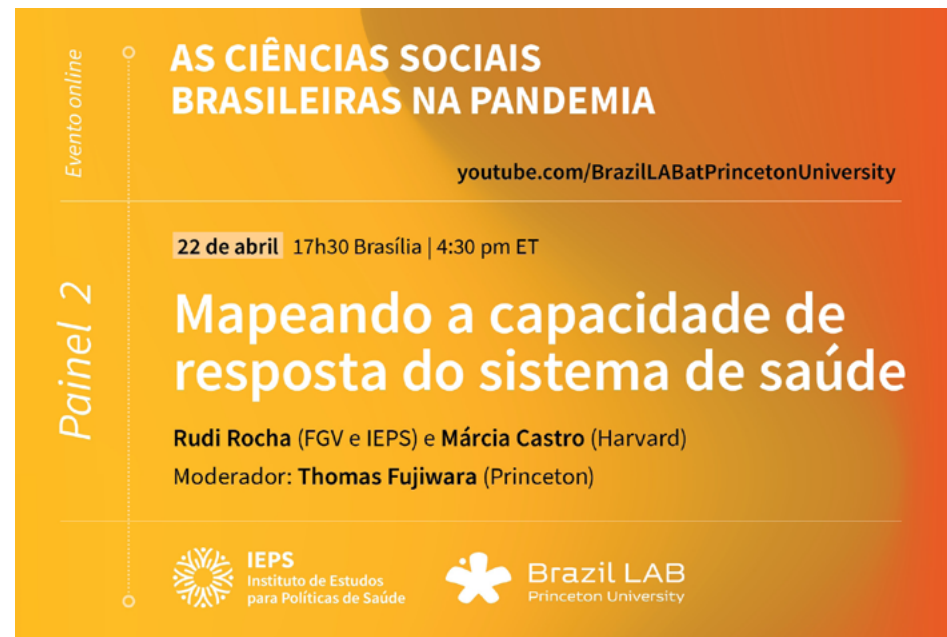
04.22 - Panel 2

## Mapping the responsiveness of the health system - [link](#) Summary - [link](#)

The webinar “Mapping the Responsiveness of the Health System” was the second of four panels to discuss the role of social sciences in the pandemic, and was attended by Márcia Castro, professor at the Faculty of Public Health at Harvard University and advisor to the IEPS; Miguel Lago, executive director of IEPS; Miqueias Mugge, historian and researcher at the Brazil Lab in Princeton; Rudi Rocha, research director at IEPS; and Thomas Fujiwara, professor in the Department of Economics and International Relations at Princeton University and co-director of the Brazil Lab. In the debate, the experts highlighted that the COVID-19 pandemic arrived precisely at one of the most

fragile moments in the capacity of the Brazilian Unified Health System (SUS) to respond to crises, such as the coronavirus, due to underfunding over recent years. In response to this challenge, the researchers reaffirmed the importance of the integration

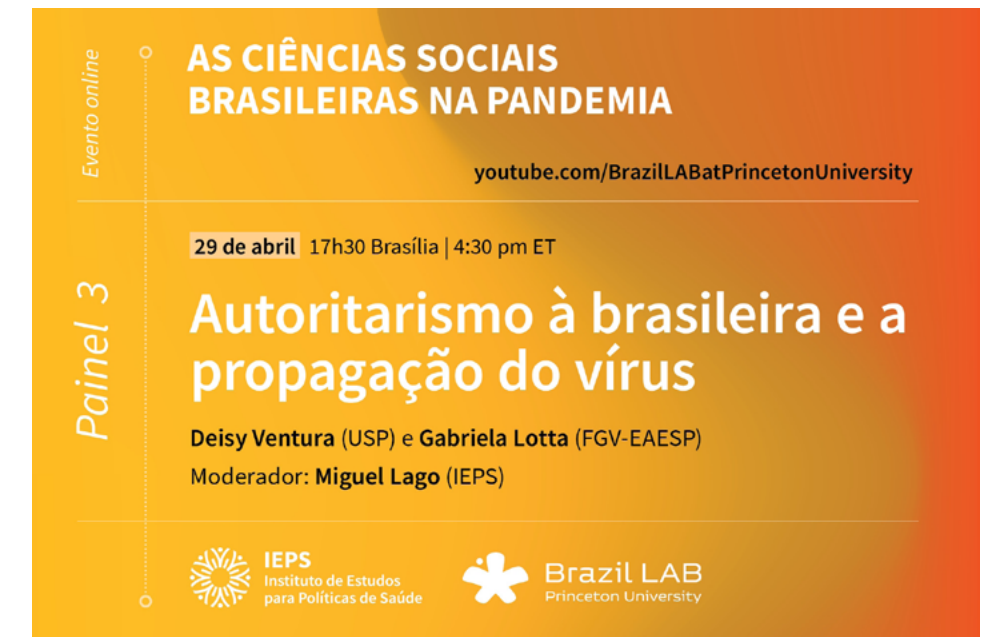
between social sciences and health policies, in order to map, in detail, the specific demands of each region of Brazil and promote a better quality medical care network.



04.29 - Panel 3

## Brazilian authoritarianism and the spread of the virus - [link](#)

The webinar “Brazilian authoritarianism and the spread of the virus” was the third in a series of four panels to analyze the diversified production of Brazilian social sciences on the COVID-19 pandemic, and was attended by Deisy Ventura, professor of ethics from the São Paulo School of Public Health and coordinator of the Graduate Program in Global Health and Sustainability; Gabriela Lotta, professor of public administration and government at Fundação Getúlio Vargas (FGV) and researcher at the Center for Metropolis Studies (CEM); Miguel Lago, executive director of IEPS; and Miqueias Mugge, historian and researcher at the Brazil Lab in Princeton. In the debate, the researchers analyzed how



Brazil’s response to the pandemic was the synthesis of a set of strands of Brazilian authoritarianism, which had already marked the country’s history during slavery and the military dictatorship, and materialized again in 2019, with the rise of the extreme

right to power. The experts expressed concern about the maintenance of the federal government’s “authoritarian” posture, even with the installation of the Parliamentary Committee of Inquiry (CPI on COVID-19) and the number of deaths due to the disease in the country.



05.06 - Panel 4

## Historical and anthropological perspectives of the pandemic - [link](#)

The webinar “Historical and Anthropological Perspectives of the Pandemic” was the last of a series of four panels to analyze the diversified production of Brazilian social sciences on the COVID-19 pandemic, and was attended by Aparecida Villaça, professor of the Postgraduate Program - Graduation in Social Anthropology at the National Museum; João Biehl, professor of anthropology at Princeton University and director of the Brazil Lab; Marcos Cueto, professor of the Postgraduate Program in History of Science and Health at Casa de Oswaldo Cruz (Fiocruz); Miguel Lago, executive director of IEPS; and Miqueias Mugge, historian and researcher at the Brazil Lab in Princeton. The researchers debated

how professors, academics, activists and writers could regain the power of reaction and social mobilization against authoritarian threats to science and to the most vulnerable communities, such as indigenous people, amid recent cuts made by the

federal executive in research resources. Panel experts said that the answer may lie precisely in the immersion in the demands of communities and groups most socially impacted during the pandemic.

02.25

## Vaccines and Public Health in Brazil: Politics vs. Science - [link](#)

(in partnership with Brazil LAB/Princeton)

In the week that Brazil reached the mark of 250 thousand deaths officially registered as a result of COVID-19, the second largest in the world at that moment, behind only the United States, the founder of IEPS, the economist Arminio Fraga, the professor of Anthropology at Princeton University João Biehl and the members of the IEPS Deliberative Council Margareth Dalcolmo and Paulo Chapchap discussed, in the webinar, the high number of victims of the pandemic, the responses of the health system and what to expect, in the midst of the beginning of the vaccination campaign. Fraga, Dalcolmo, Chapchap and Biehl bridged the gap between politics and health to present paths capable of changing the course of the escalation of infections and deaths in Brazil.



11.24 and 11.25

## Mapping and Addressing the Medium and Long-Term Effects of the COVID-19 Pandemic

(in partnership with the Mobility and Social Development Institute and the World Bank)

[Day 11.24 link](#) and [Day 11.25 link](#)

**In two days, experts analyzed the losses caused by the pandemic in health, demography, social assistance and education, and traced paths for the recovery**

11.24 - Panel 1

### Opening

The opening panel had the participation of Alexandre Marinho, PhD in economics from Fundação Getúlio Vargas (FGV); Guilherme Werneck, physician and researcher in epidemiology; and Margareth Dalcolmo, pneumologist, researcher at the Oswaldo Cruz Foundation (Fiocruz) and member of the IEPS Deliberative Council. The mediation was performed by journalist Paula Miraglia.

11.24 - Panel 3

### Adolescents (13 to 19 years old)

It had the participation of Aparecida de Fátima Gavioli Soares Pereira, Secretary of Education of Goiás; Cecília Machado, chief economist at Banco BOCOM BBM and professor at Fundação Getúlio Vargas (FGV); Cristiane de Freitas, pediatrician and psychoanalyst; and Michela Carlana, professor at the Harvard Kennedy School. The mediation was performed by journalist Fábio Pupo.

11.25 - Panel 2

### Closing - Data Generation

The panel had the participation of Eduardo Rios Neto, president of the Brazilian Institute of Geography and Statistics (IBGE); Eleonora Cruz Santos, director of statistics and information at Fundação João Pinheiro; and Michael França, researcher at Insper and columnist for “Folha de S. Paulo”. The mediation was performed by journalist Ricardo Gandour.

11.24 - Panel 2

### Early Childhood (0 to 5 years old)

The panel had the participation of Amanda Devercelli, global leader in the area of Early Childhood at the World Bank; Ana Paula Gomes, from the National Secretariat for Early Childhood Care; Rita Almeida, lead economist for Latin America at the World Bank; and Rodrigo Oliveira, Municipal Health Secretary of Niterói (RJ). The mediation was performed by journalist Ricardo Gandour.

11.25 - Panel 4

### Children and Pre-adolescents (6 to 12 years old)

The panel had the participation of Cláudio Moura Castro, economist; Fred Amancio, Secretary of Education of Recife (PE); Paulo Bonilha, pediatrician and public health specialist; and Renan de Almeida Sargiani, cognitive neuroscientist. The mediation was performed by journalist Claudia Collucci.

# We directly influenced public policies

IEPS provided technical support to local managers, as well as at the national level, for projects and strategies to implement policies that strengthen the Unified Health System (SUS), mitigate problems and improve the health conditions of the population





# Rio de Janeiro Bill to fight childhood obesity

In partnership with the Desiderata Institute, IEPS carried out political advocacy actions for the approval of Bill No. 1,662/2019, authored by City Representative César Maia, that established measures to fight childhood obesity in the municipality of Rio de Janeiro.



Among the proposed measures, the main one is the ban on the sale or availability of ultra-processed foods and sugary drinks in public and private schools. As a result of the first vote, the Bill was approved with 30 votes in favor and, once approved in a second vote and sanctioned by the City Hall, it will impact more than one million children and adolescents (655 thousand in municipal schools and 414 thousand in private schools).

As part of the political advocacy strategy, the project had repercussions on the main media outlets in the country, namely: “Jornal Nacional”, “Bom Dia Rio”, “O Globo”, “Valor Econômico” and “Veja Rio”. In addition, chef and advocate of “good, healthy and practical food”, Rita Lobo, publicly supported the Bill in a post on social media and in an article co-authored with Armínio Fraga for the newspaper “O Globo”.





## Recife Capital of Health

IEPS signed a technical cooperation agreement with the city of Recife, initiating the project “Recife Capital da Saúde” (Recife Capital of Health), structured in two work fronts.



The first one consists in the creation of a quality assessment system in primary care and in the construction of high-impact innovation pilots, which will allow the municipality to better understand the performance of each basic health unit in terms of the work process, results of health, access and quality of services. In 2021, the project offered 17 workshops and dialogued with 250 people, including professionals, managers and representatives of service users, with the aim of mapping the main network problems and their respective causes. With this, Recife will be able to understand, evaluate and reward health practices, humanizing care and offering services efficiently. Also based on the mapping and use of the most up-to-date evidence available, the design of pilots was built together with the

network, which, if proven effective, will be scaled to the entire primary care service.

The second work front consists of the Recife Legislative Health Agenda, with the objective of building a programmatic north for the legislative activities of the municipal Executive Power, in order to contribute to the improvement of public health in Recife. The Agenda will comprise two sets of draft laws and normative instruments. The first concerns actions aimed at promoting health in the municipality. The second will focus on strengthening health management, inspired by the mapping of the network's needs and the innovation pilot projects designed.

## Health Agenda 2022

The Health Agenda 2022 project focuses on the discussions that will take place during the 2022 general elections, to provide an opportunity for a debate focused on the real needs of the population and the Brazilian health system. The Agenda is organized around the elaboration of a set of concrete proposals to strengthen Brazil's health policies and that meet criteria of relevance and technical feasibility, based on a broad diagnosis of the country's health conditions and outcomes, and expert recommendations for the main challenges of the system in the post-pandemic scenario.

All recommendations will be based on scientific evidence and will seek to identify what the Brazilian State will need to address in the coming years to improve health policies in Brazil, ensure access to quality health care in an equitable manner, and ensure that the use of resources and regulation of the health system are as effective as possible. In 2021, the project included 23 in-depth interviews with health experts and 18 thematic diagnoses, in partnership with Instituto Veredas, for a proposal document, which will be released in 2022.

## Federal Law Project and children's and adolescents' mental health

In 2021, IEPS helped to prepare, together with the office of Representative Tábata Amaral, Bill no 3,408/2021, which establishes the National Policy for Psychosocial Care in School Communities. The Bill, filed in October, promotes articulation between education, health and social assistance, to strengthen psychosocial care actions aimed at school-age

children and adolescents. Intervention in basic education is justified by the growing rate of mental disorders in childhood and adolescence, especially due to the impacts generated by the pandemic. A future approval of the Bill can positively impact the prevention of mental disorders in this specific population and the fight against stigma and prejudice.

## Support for the 'Better Care Program', from the Ceará State Health Department

IEPS established a partnership with the Health Department of the Government of the State of Ceará, with the objective of supporting the "Programa Cuidar Melhor" (Better Care Program): a cooperation pact between the state, municipalities and society that aims to improve health outcomes, especially in dealing with the problems that most cause illness and death in the population of Ceará. The partnership consists in the elaboration of a document that will publish recommendations produced from scientific evidence to support the achievement of the program goals and indicators and guide municipalities in relation to the implementation of effective health policies. The document also aims to provide training for Mayors and Municipal Health Secretaries in order to improve health indicators.

Situational diagnosis workshops were held together with the Coordination of Sectorial Policies with state managers from the 5 superintendencies and the 17 decentralized health areas in the state, in order to understand the influence of the regional context in the fulfillment of actions, health policies and achievement of established parameters by the program. A checklist was produced to map the health scenario of the 184 municipalities in Ceará, specifically aimed at understanding the main gaps in terms of care and management practices, which will serve as a starting point to address the main health challenges faced by the municipalities of Ceará.

# We carried out public monitoring and social control

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IEPS monitors the evolution of indicators and follows, in the political sphere, debates on regulatory frameworks, public funding and the implementation of public policies for health



## Monitoring of the Health Insurance Commission in the National Congress

Currently, there is an active Special Commission on the Health Insurance Act in the National Congress, in which more than 250 proposals for the Reform of Law no. 9,658, of June 3, 1998, which establishes the legal framework that regulates the sector of private health insurance in the country. The Commission is being monitored to understand in what sense the suggested changes can promote relevant regulatory changes in the health insurance market, one of the components of which is characterized by the fragmentation of the coverage currently offered to users, and the possible implications for the SUS (Brazilian Unified Health System).

## Health Budget and Financial Monitoring

The preparation of Technical Note No. 23 marked the beginning of monitoring the instruments of the budget cycle, which structure government priorities and expenditures. The TN analyzes the Draft General Budget Law (PLOA) for the year 2022 and includes as main findings that: i) proposed health expenditures had the lowest participation in the PLOA in the last 10 years; ii) the funding of Primary Care is stagnant and the additional resources destined to fight the pandemic may be insufficient; and iii) the proposal maintains the downward trend in investments, which, between 2013 and 2022, fell by 77%. There was great repercussion of TN in media vehicles, including vehicles such as “O Estado de S. Paulo”, “Exame”, “TV Cultura” and “Brasil 247”, positioning IEPS as an institution that monitors the application of resources from the Ministry of Health.

## Monitoring of the agenda for fighting NCDs - Chronic Noncommunicable Diseases

As part of the partnership “Alliance for Primary Care”, signed between IEPS and Umane, the Institute monitors the agenda for confronting CNCDs within the scope of the Federal Executive and Legislative branches. In 2021, IEPS worked with health experts and players from the National Council of Health Secretaries (CONASS) to understand the worsening budgetary pressures on the SUS, amid the worrying situation of damming up services and treatments for NCDs in the country as a result of the COVID-19 pandemic.

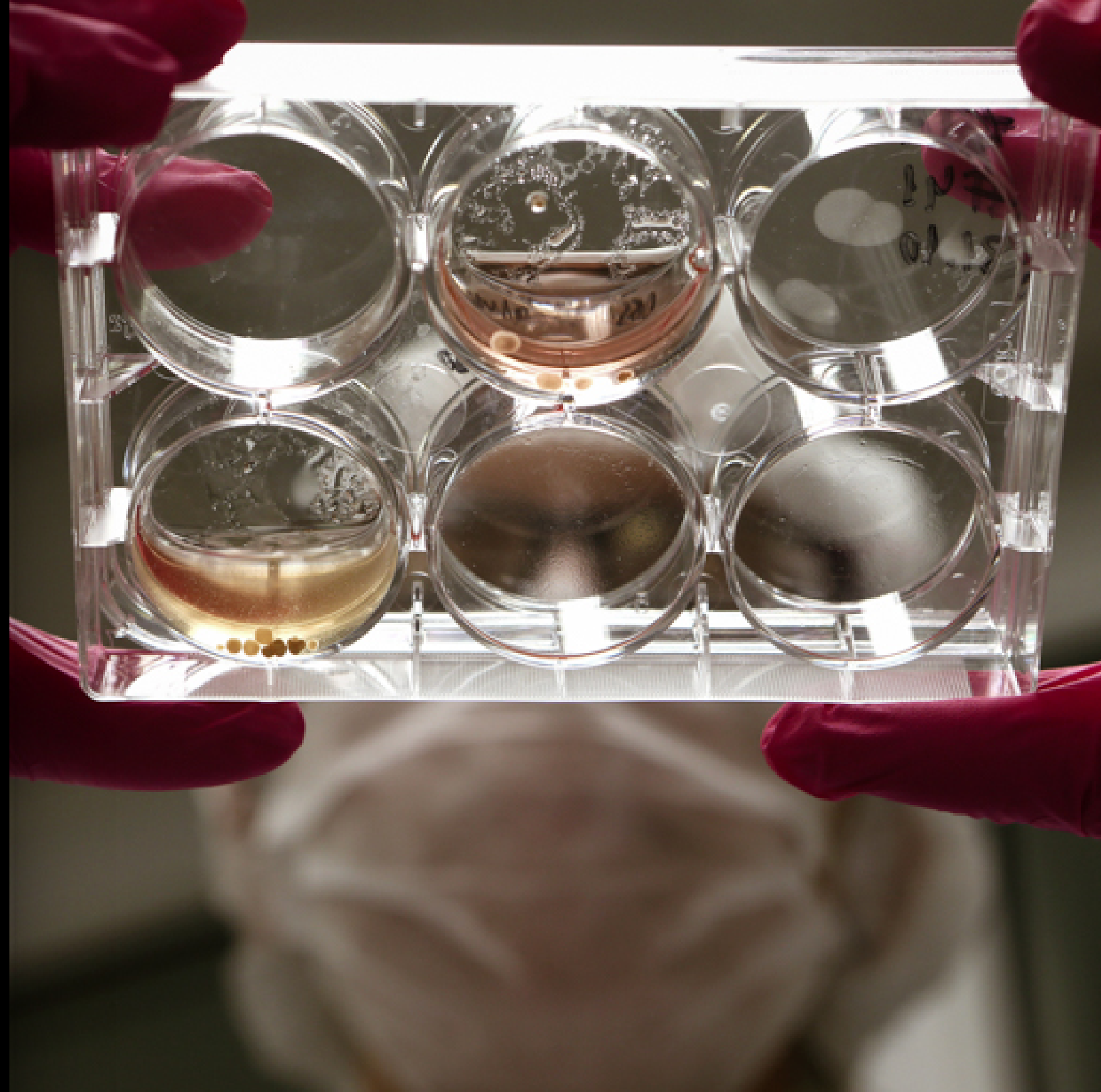
Another front were the actions of political incidence for the implementation of the Telephone Surveillance of Risk Factors and Protection for Chronic Illnesses, the VIGITEL. The survey, which has been in place since 2006 to monitor the evolution of behavioral risk factors and NCDs in the Brazilian population, has not yet had its report published for the 2020 edition, and the data collection for the 2021 edition typically would have started in January but only started in September after pressure from IEPS and civil society organizations. As part of the advocacy actions, IEPS organized and participated in its first public hearing in the House of Representatives, in October 2021, to exercise the role of social control of the Ministry of Health and with the objective of making commitments around the implementation and dissemination of Vigitel.



# And there's a lot more to come

IEPS will have thematic agendas in research and public policies, new structuring of projects, integration between teams, a new website and social media presence to expand the debate on health in Brazil

(vi)



# Amazon 2030

**In partnership with the Climate Policy Initiative and Imazon, the Amazon 2030 project aims to develop a research agenda that contributes to the debate on health in the Brazilian Amazon**

The project focuses on the identification of problems and programs with potential for impact assessments and production of proposals for overcoming challenges. In 2022, the results of the project will be published and disseminated through an edition of the “Diálogos IEPS”.



# Program Consolidation

**What is new for 2022 is that IEPS will organize its projects into a set of seven thematic programs**

This idea came with two goals: (i) to foster integration between teams and projects and (ii) to present a more cohesive narrative to our potential funders:



**PRIMARY CARE**  
To improve the problem-solving capacity of Primary Care and increase its coverage, effectively universalizing the right to health in Brazil.



**HEALTHY HABITS**  
To reduce the prevalence of Chronic Non-Communicable Diseases (NCDs) through healthy eating and physical exercise.



**MENTAL HEALTH**  
To reduce the incidence of mental health problems in the Brazilian population and ensure a resolute psychosocial care structure within the SUS (Brazilian Unified Health System).



**TECHSUS**  
To use new technologies to take a leap in SUS problem-solving capacity, ensuring the improvement of the health conditions of Brazilians.



**HEALTH IN THE AMAZON**  
To analyze the burden of disease and health networks in the Legal Amazon, and support the region in balancing health and care indicators with the rest of Brazil.



**HEALTH AGENDA 2022**  
The Health Agenda 2022 project focuses on the discussions that will take place during the 2022 general elections, to provide an opportunity for a debate focused on the real needs of the population and the Brazilian health system.

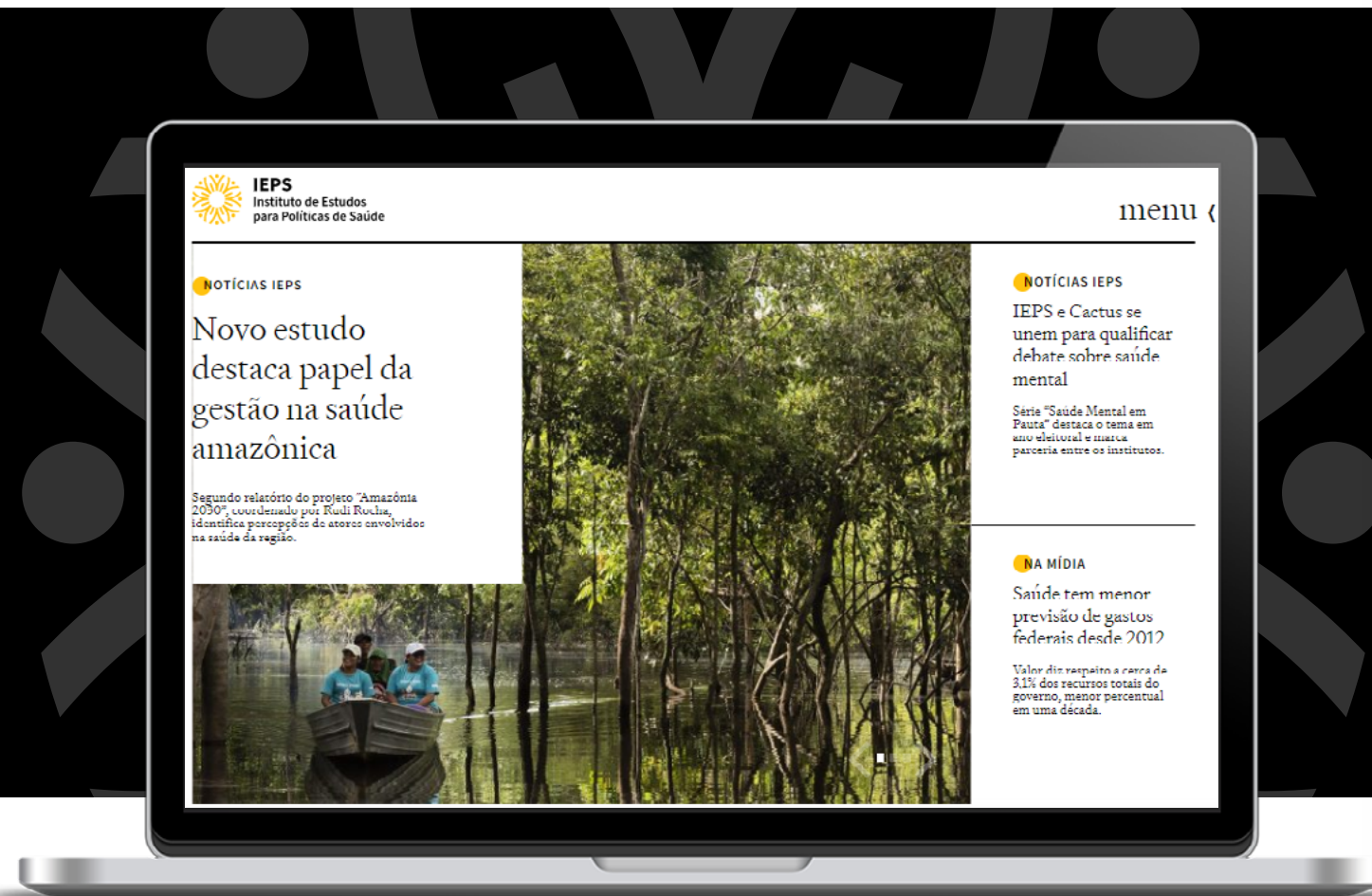


**HEALTH AND INFORMATION**  
To produce information about the Unified Health System (SUS) and ensure data transparency.



## The new IEPS website

Based on an international benchmark, a new briefing was drafted and the development process started, with the launch scheduled for 2022



The website will play the role of a publisher and the Institute's "own media". It will also serve as a center of reference and a content hub for health policies and practices.

The main digital showcase for the Institute for Health Policies Studies has a redesigned look and new sections, in addition to a different logic for organizing content, with clearer navigation. Within the new organization, content will have a more newsworthy tone and more frequent updates.

With improvements in technology, loading is faster and pages are fully responsive – they automatically adapt to smartphones, computers and tablets. The new design also involves unique typography treated for different screens. All this while maintaining the Institute's original visual identity, such as the color scheme and logo.





# Presence on Social Media

## LINKEDIN

IEPS intensified the dissemination of scientific productions, partnerships, events and other content of its own authorship on health policies at social networks. The first was “LinkedIn”, which has around 770 million members and is the largest professional social network. The platform has the differential of being a space that promotes projects by civil society entities, leverages knowledge and connects people engaged in purposes; in the case of IEPS, the improvement of public health policies in Brazil.

Through LinkedIn, IEPS wants to make it easier for network users to contact research projects, the contents of the “Diálogos IEPS”, the articles on the “Saúde em Público” blog, contributions to the press, as well as other activities and initiatives.

In two months of activation (November and December), 23 posts had 19,835 views, an average of 862 views per post. 1,283 followers were attracted (compared to 838 followers when the profile did not yet have structured content, a growth of 52% in two months).



## INSTAGRAM AND TWITTER

After consolidating the IEPS profile on LinkedIn in 2021, the communication team’s next step is to take, still in the first quarter of 2022, the IEPS brand and its productions to “Instagram” and “Twitter”. These networks have different communication dynamics and users’ demands compared to LinkedIn, but our intention is to continuously disseminate the Technical Notes, Institutional Studies, newsletters, events and IEPS insertion in the Media, with a specific language for each of these two social networks, where IEPS also wants to be present.

# IEPS Data

The IEPS Data portal will provide relevant health indicators in an easily accessible and interpretable form to managers, academics, journalists and the population in general. Despite being rich and detailed, existing health data are dispersed in different information systems and are often difficult to understand, which makes it difficult to consult, interpret and cross-reference important information. The objective is to help managers, communicators, researchers and the general population access and understand health in the country and in its places of interest.

The nearly 200 indicators were chosen and treated after consultation with experts and will continue to be improved and expanded with the same technical rigor. They are divided into seven thematic blocks – Primary Care, Morbidity and Mortality, Resources, Supplementary Health, Expenditure, Socioeconomic and Demographics – and will be available for download at the municipal, state, regional and macro-regional levels for several years.



GRUPO DE INDICADORES	ATENÇÃO PRIMÁRIA (17 INDICADORES)
Atenção Primária	Cobertura da Atenção Básica (%)
Mortalidade e Morbidade	Cobertura de Agentes Comunitários de Saúde (%)
Recursos	Cobertura de Estratégia de Saúde da Família (%)
Saúde Complementar	Cobertura Vacinal de BCG (%)
Gastos	Cobertura Vacinal de Rotavírus Humano (%)
Indicadores Socioeconômicos	Cobertura Vacinal de Meningococo C (%)
Demografia	Cobertura Vacinal de Pneumocócica (%)
	Cobertura Vacinal de Poliomielite (%)

# ...And the team grew: who did and does all this

The growth of the IEPS team of professionals and specialists in 2021 raises the contributions and mobilizations in favor of quality and equity in the access of Brazilians to health. To be part of IEPS is to dedicate yourself to this purpose

(viii)





**From 2020 to 2021, the IEPS team jumped from 13 to 21 professionals from different areas, such as law, economics, administration, political science, public health and communication, committed to improving public policies for health in Brazil.**

**In 2021, the Administrative area gained two employees; Public Policy, five. In addition, IEPS created a Communication area, with the contribution of a full-time journalist and a consultant. The IEPS structure has three directors; ten members of the Public Policy department; three from Research, four from Administrative and one from Communication.**

**2021 was also the year of implementation of the IEPS Deliberative Council. This is the instance that approves the annual planning, supervises the performance of the Board and, ultimately, dismisses the Board. This council is composed of seven members: Ana Inoue, Arminio Fraga, Marcelo Trindade, Margareth Dalcolmo, Paulo Chapchap, Paulo Hartung and Rodrigo Fiães.**

**Advocacy and Government Relations**

In 2021, IEPS structured the area of advocacy and government relations, which currently has a team made up of four people dedicated to cross-cutting projects across the other areas of the Institute. Starting from strategic planning based on technical diagnoses, legislative production and political conjuncture, five major advocacy themes were prioritized: (i) Stronger Primary Care; (ii) Health Promotion and Coping with NCDs; (iii) Supplementary Health; (iv) Technology and Health; and (v) Mental Health.

In general terms, IEPS Advocacy projects for health and governmental relations permeate the entire cycle of public policies, from agenda setting to monitoring, and have as their central objective to contribute to the strengthening of the Unified Health System in Brazil and to the improvement of the population's health conditions. Their main lines of action are:

- i. Elaboration of concrete and viable proposals for the health system: proposing actions based on scientific knowledge to subsidize the public power and strengthen the Unified Health System.
- ii. Articulation with civil society and with key players in the Brazilian health system: generating public commitments around more equitable and resolute health policies.
- iii. Translation of scientific knowledge for political players: bridging the gap between scientific evidence and decision makers, transforming them into tools capable of supporting the work of these actors and qualifying public health policies.
- iv. Public monitoring: continuous monitoring of health policies and actions by the Federal Legislative and Executive Powers.

**Communication and Media Area**

In 2021, IEPS expanded the communication team and carried out a series of communication and activation activities. The IEPS Communication and Media area's mission is to propagate and maximize the interaction of research and content produced by the institute with all interested parties - especially managers, decision makers, academics, civil society organizations, the press and the general public. For this, the Institute articulates its own channels, which give IEPS the role of original publisher: for the website, social networks, newsletters and channels in partnership with vehicles, in addition to serving as a permanent platform for events - Diálogos IEPS - which amplifies and disseminates all other channels. At the same time, the area works to increase the impact of IEPS production on general and specialized, national and regional media. With this range of activities, the greatest possible impact is sought around the Institute's four axes of action, maximizing the fulfillment of the strategic objectives not only of IEPS, but also of its partners and funders.

**Operations Area**

The IEPS operations area seeks to guarantee the necessary institutional structure and support for the other areas to act effectively and focused on their objectives, that is, in the production of research and the incidence of public policies. The area is composed of two nuclei: administrative-financial and management areas. During 2021, IEPS initiated several structuring actions related to administrative-financial and institutional management, including:

- i. Organization of policies and guidelines for remote work during the pandemic;
- ii. Implementation of new accounting, budget and financial management systems;
- iii. Review of policies and guidelines for HR management; implementation of project monitoring processes;
- iv. Review of processes and procedures related to contract management;
- v. Compliance with the LGPD - General Data Protection Law
- vi. Training and capacity building actions for the team.

# PEOPLE

## Advisory Council

**Drauzio Varella**  
**Guilherme Frering**  
**João Biehl**  
**Lígia Bahia**  
**Marcia Castro**  
**Paulo Chapchap**  
**Paulo Hartung**  
**Ricardo de Oliveira**  
**Roberto Cooper**

## Deliberative Council

**Ana Inoue**  
**Arminio Fraga**  
**Marcelo Trindade**  
**Margareth Dalcolmo**  
**Paulo ChapChap**  
**Paulo Hartung**  
**Rodrigo Fiães**

## Tax Council

**Ana Novaes**  
**Eduardo Soares**

## Team Members

**Miguel Lago** - Executive Director  
**Rudi Rocha** - Research Director  
**Arthur Aguillar** - Public Policy Director  
**Agatha Eleone** - Public Policy Researcher  
**Beatriz Almeida** - Public Policy Assistant  
**Beatriz Rache** - Health Economics Researcher  
**Dayana Rosa** - Public Policy Researcher  
**Fernanda Leal** - Public Policy Researcher  
**Helena Arruda** - Masters Grantee  
**Helena Ciorra** - Administrative Analyst  
**Jéssica Remédios** - Public Policy Researcher  
**Maíra Coube Salmen** - Doctorate Grantee  
**Manuel Faria** - Public Policy Assistant  
**Maria Cristina Franceschini** - Management Supervisor  
**Maria Letícia Machado** - Public Policy Researcher  
**Maria Vitória Cruz** - Health Economics Intern  
**Matías Mrejen** - Health Economics Researcher  
**Mattheus Reis** - Communication Assistant  
**Mayra Neves** - Administrative Assistant  
**Rebeca Freitas** - Government Relations Specialist  
**Sara Tavares** - Public Policy Researcher  
**Thaísa Marques** - Administrative Analyst  
**Victor Nobre** - Public Policy Intern

## Associate Researchers

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**Breno Sampaio**  
**Cecilia Machado**  
**Christopher Millett**  
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**Damian Clarke**  
**Daniel Wei Liang Wang**  
**Elize Massard da Fonseca**  
**Fabio Kon**  
**Gabriela Spanghero Lotta**  
**Humberto Laudares**  
**Kenya Noronha**  
**Leandro Rezende**  
**Marina Martins**  
**Mônica Viegas Andrade**  
**Naercio Aquino Menezes Filho**  
**Pablo Celhay**  
**Paula Spinola**  
**Renata Narita**  
**Rodrigo R. Soares**  
**Sergio Firpo**  
**Silvia Barcellos**  
**Sonia Bhalotra**  
**Tatiane Menezes**  
**Thiago Tachibana**  
**Thomas Hone**  
**Vladimir Pinheiro Ponczek**

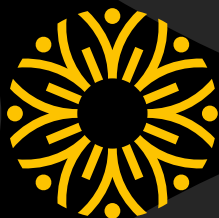
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# Abbreviations and acronyms

- ABRASCO** - Brazilian Association of Collective Health
- ACS** - Community Health Agents
- CEBRAP** - Brazilian Center for Analysis and Planning
- CEDEPLAR** - Center for Regional Development and Planning
- CEM** - Center for Metropolis Studies
- CONASS** - National Council of Health Secretaries
- COVID-19** - Coronavirus Disease 2019
- CPI** - Parliamentary Committee of Inquiry
- CNCD** - Chronic Noncommunicable Disease
- FGV** - Getulio Vargas Foundation
- Fiocruz** - Oswaldo Cruz Foundation
- IBGE** - Brazilian Institute of Geography and Statistics
- HDI** - Human Development Index
- INSS** - National Institute of Social Security
- LMIC** - Low- and middle-income countries
- LGPD** - General Data Protection Law
- NASF** - Family Health Support Centers
- NUPENS** - Nucleus of Epidemiological Research in Nutrition and Health
- OECD** - Organization for Economic Cooperation and Development
- WHO** - World Health Organization
- PHQ-9** - Patient Health Questionnaire
- PM2.5** - Particulate Matter 2.5 (particulate material with a diameter of less than 2.5 µm)
- PNAE** - National Program of School Meals
- PNI** - National Immunization Program
- PNSIPN** - National Policy for the Comprehensive Health of the Black Population
- SUS** - Unified Health System
- TSE** - Superior Electoral Court
- UFBA** - Federal University of Bahia
- UFMG** - Federal University of Minas Gerais
- UFRN** - Federal University of Rio Grande do Norte
- UFRB** - Federal University of Recôncavo da Bahia
- UFRGS** - Federal University of Rio Grande do Sul
- UFRJ** - Federal University of Rio de Janeiro
- UPA** - Emergency Care Unit
- USP** - University of São Paulo
- SVI** - Social Vulnerability Index





**IEPS**

Instituto de Estudos  
para Políticas de Saúde