

THE BRAZILIAN UNIFIED HEALTH SYSTEM AS A MODEL OF A UNIVERSAL SYSTEM IN THE GLOBAL HEALTH SCENARIO <https://doi.org/10.63330/aurumpub.044-002>

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Abstract

The Brazilian Unified Health System (SUS) represents one of the largest public universal health systems in the global health landscape, recognized for its commitment to comprehensive, universal, and equitable access to healthcare. This chapter aims to analyze SUS as a model of a universal health system, highlighting its principles, achievements, and challenges within the international context. The methodology is based on a qualitative bibliographic review, using scientific publications, institutional documents, and reports from international organizations, particularly studies by scholars such as **Paim, Giovanella, Mendes, and Souza**, who have extensively examined Brazilian public health policies. The findings indicate that SUS has significantly expanded access to healthcare services, strengthening primary healthcare, health surveillance, and national immunization programs that have become international references. However, challenges remain regarding financing, management efficiency, and regional inequalities. It is concluded that, despite structural limitations, SUS continues to stand as an important model of a universal health system, contributing to global debates on equity, the right to health, and the organization of public health systems in countries with diverse socioeconomic contexts.

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INTRODUCTION

The right to health is widely recognized as a fundamental human right and constitutes a central element in the promotion of dignity, social equity, and human development. In this context, universal health systems assume a strategic role in guaranteeing equal access to health services, especially in societies marked by social and economic inequalities. In Brazil, the Unified Health System (SUS), established by the Federal Constitution of 1988, represents one of the largest experiences of a universal public system in the world, being grounded in the principles of universality, comprehensiveness, and equity (Paim, 2015). SUS organizes a network of services that ranges from primary care to highly complex procedures, offering free care to the Brazilian population.

In the global health scenario, discussion about universal health systems has intensified, especially in light of challenges such as population aging, health emergencies, and inequalities in access to health services. In this context, SUS has frequently been cited in international studies as a relevant experience in the construction of public policies aimed at guaranteeing the right to health, although it faces structural challenges related to financing, management, and the organization of services (Giovannella et al., 2018).

Given this context, the research problem is defined as understanding how the Unified Health System can be considered a model of a universal system in the global health scenario, taking into account both its advances and the challenges faced in consolidating its principles.

The general objective of this chapter is to analyze the Unified Health System as a model of a universal system in the context of global health. As specific objectives, it seeks to: discuss the principles and foundations that structure SUS; analyze the main advances achieved since its implementation; and reflect on contemporary challenges related to its sustainability, financing, and management.

The relevance of this study is justified by the importance of SUS in guaranteeing the right to health in Brazil and by the need to broaden the academic debate on universal health systems in the international context. Understanding the potentialities and limitations of this system contributes to reflections on public policies aimed at promoting equity and social justice in access to health services.

From a theoretical point of view, this chapter engages with studies on public policies and health systems, especially those that analyze the Brazilian health reform and the organization of SUS. The contributions of authors who discuss the historical trajectory of the system and its contemporary challenges stand out, highlighting the importance of healthcare networks, primary care, and public policies aimed at universalizing access (Mendes, 2011; Paim, 2015; Giovanella et al., 2018). These contributions make it possible to understand SUS not only as a national public policy, but also as a relevant experience in the international debate on universal health systems.

METHODOLOGY

This research is characterized as a qualitative study, with a descriptive and exploratory approach, developed through a bibliographic review. This type of investigation makes it possible to analyze and interpret scientific productions that have already been published, contributing to the theoretical understanding of a given phenomenon or theme. The choice of this approach is justified by the need to understand the Unified Health System (SUS) in the context of global health, considering its conceptual, political, and institutional foundations (Gil, 2019).

The bibliographic review was carried out through consultation of books, scientific articles, institutional documents, and reports from national and international organizations that discuss public health policies, universal systems, and the organization of SUS. Among the main databases used, SciELO, Google Scholar, and the Virtual Health Library (BVS) stand out, in addition to official documents from the Ministry of Health and the World Health Organization. The selection of sources considered criteria of thematic relevance, currency of publications, and academic recognition of the authors in the field of

collective health (Marconi; Lakatos, 2021).

RESEARCH TYPE

The study is classified as bibliographic research, since it was developed based on previously published materials, allowing the analysis of different theoretical perspectives on the functioning and importance of SUS in the global health scenario. According to the methodological literature, this type of research enables the researcher to examine existing scientific contributions, promoting a critical synthesis of the available knowledge on a given topic (Gil, 2019).

DATA COLLECTION TECHNIQUES AND INSTRUMENTS

Data collection was carried out through the survey and analysis of academic productions related to the Unified Health System, global health, and universal health systems. Scientific articles, book chapters, official documents, and institutional reports addressing the organization, principles, and challenges of SUS were selected. The information obtained was organized and analyzed thematically, making it possible to identify the main debates present in the literature on the role of the Brazilian system in the international context.

SAMPLE AND SELECTION CRITERIA

The research sample consisted of scientific productions published in journals in the fields of collective health, public policies, and global health, in addition to reference works on SUS. Studies published mainly over the last two decades were considered, a period marked by important discussions on the consolidation and challenges of the Brazilian health system. The selection prioritized works by authors recognized in the field, as well as institutional documents relevant to understanding health policies in Brazil (Paim, 2015; Giovanella et al., 2018).

ANALYSIS PROCEDURES

Data analysis was carried out through critical and interpretive reading of the selected works, seeking to identify concepts, arguments, and evidence that contribute to understanding SUS as a model of a universal system in the global health scenario. The discussion of the results was grounded in theoretical frameworks of collective health and public policies, making it possible to establish relationships between the principles of the Brazilian system and international discussions on universal access to health (Mendes, 2011).

RESULTS AND DISCUSSION

The analysis of the literature showed that the Unified Health System (SUS) has consolidated itself as one of the largest experiences of a universal public system in the world, responsible for guaranteeing free access to health services for millions of Brazilians. Since its creation, the system has significantly expanded healthcare coverage, especially through Primary Health Care, considered the main entry point to the service network. The Family Health Strategy, for example, plays a fundamental role in health promotion, disease prevention, and the continuous monitoring of the population, contributing to the improvement of various health indicators (Paim, 2015).

Another relevant aspect identified in the studies concerns the organizational structure of SUS, based on administrative decentralization and social participation. This model allows health management to be shared among the federal, state, and municipal levels, enabling greater adaptation of public policies to local needs. In addition, the participation of civil society in health councils and conferences strengthens social control and contributes to the construction of more democratic and inclusive policies (Giovannella et al., 2018).

In the global health scenario, SUS also stands out for the implementation of public policies with major population impact, such as the National Immunization Program, epidemiological surveillance actions, and policies for access to medicines for the treatment of chronic and infectious diseases. These

initiatives demonstrate the system's capacity to develop nationwide strategies aimed at health promotion and disease prevention, and they are frequently cited as references for other developing countries (Mendes, 2011).

However, the literature also points to important challenges that still need to be overcome for the system's full consolidation. Among these challenges are limitations in public health financing, regional inequalities in the provision of services, and difficulties related to management and the integration of care networks. Such factors may compromise the effectiveness of the principles of universality and equity that guide SUS, highlighting the need for continuous investment and improvement of the system's management policies (Paim, 2015).

Based on the analysis of the main contributions of the literature, Table 1 presents a synthesis of the advances and challenges of the Unified Health System in the context of global health.

Table 1

Main advances and challenges of the Unified Health System in the global health scenario

Analyzed dimension	Main advances identified	Challenges identified in the literature
Access to health services	Expansion of universal and free access to health services; expansion of Primary Health Care through the Family Health Strategy.	Regional inequalities in access and in the distribution of resources and professionals.
Public health policies	Implementation of national immunization programs, epidemiological surveillance, and disease control measures.	Need for greater integration among levels of care.
Organization of the system	Administrative decentralization among the federal government, states, and municipalities; social participation in health councils and health conferences.	Difficulties in the management and coordination of healthcare networks.
Impacts on population health	Reduction in infant mortality, expansion of vaccination campaigns, and improvement of health indicators.	Limitations related to public health financing.
International recognition	SUS recognized as a model of a universal system in developing countries.	Financial sustainability and modernization of management.

Source: Prepared by the author based on Paim (2015), Mendes (2011), and Giovanella et al. (2018).

The analysis of these results demonstrates that, despite structural challenges, SUS represents a relevant experience of public policy aimed at guaranteeing the right to health. The literature highlights that strengthening primary care, adequate financing, and improving management are essential factors for the sustainability of the system. In this way, SUS remains an important object of study in the field of global health, contributing to the international debate on the organization of universal health systems capable of promoting equitable and comprehensive access for the population (Giovanella et al., 2018).

CONCLUSION

This chapter aimed to analyze the Unified Health System (SUS) as a model of a universal system in the context of global health, considering its principles, advances, and challenges throughout its trajectory. Based on the literature review conducted, it was possible to understand that SUS represents one of the largest experiences of a public health system in the world, structured on the principles of universality, comprehensiveness, and equity, guaranteeing free access to health services for the entire Brazilian population.

The results of the study showed that SUS has promoted important advances in access to health services, especially through the expansion of Primary Health Care and the implementation of public policies with broad population reach, such as immunization programs, epidemiological surveillance actions, and strategies aimed at health promotion and prevention. These initiatives contributed to significant improvements in various health indicators, in addition to strengthening the role of the system in the organization of public policies aimed at guaranteeing the right to health.

Despite the advances observed, challenges still persist that affect the consolidation and sustainability of the system. Among these challenges are limitations in public health financing, regional inequalities in the provision of services, and difficulties related to the management and integration of care networks. These factors demonstrate the need to strengthen public health policies and for continuous investment to ensure greater efficiency and quality in the provision of services.

Thus, it is concluded that the Unified Health System constitutes a relevant experience in the international scenario, contributing to the debate on universal health systems and on the importance of public policies aimed at promoting equity and universal access. As a contribution, this study reinforces the importance of SUS for guaranteeing the right to health in Brazil and for building fairer and more inclusive health systems. It is recommended that future research deepen analyses of the system's contemporary challenges and investigate strategies capable of strengthening its management, financing, and capacity to respond to the needs of the population.

REFERENCES

- Brasil. Ministério da Saúde. *Sistema Único de Saúde (SUS): princípios e conquistas* [Unified Health System (SUS): principles and achievements]. Brasília: Ministério da Saúde, 2011. 44 p.
- Giovanella, Lúcia et al. *Políticas e sistema de saúde no Brasil* [Policies and health system in Brazil]. 2. ed. Rio de Janeiro: Editora Fiocruz, 2018. 1100 p.
- Gil, Antonio Carlos. *Métodos e técnicas de pesquisa social* [Methods and techniques of social research]. 7. ed. São Paulo: Atlas, 2019. 248 p.
- Lakatos, Eva Maria; Marconi, Marina de Andrade. *Fundamentos de metodologia científica* [Fundamentals of scientific methodology]. 9. ed. São Paulo: Atlas, 2021. 320 p.
- Mendes, Eugênio Vilaça. *As redes de atenção à saúde* [Health care networks]. Brasília: Organização Pan-Americana da Saúde, 2011. 549 p.
- Organização Mundial da Saúde. *Relatório mundial da saúde: financiamento dos sistemas de saúde – o caminho para a cobertura universal* [World health report: health systems financing – the path to universal coverage]. Genebra: OMS, 2010. 128 p.
- Paim, Jairnilson Silva. *O que é o SUS* [What is SUS]. Rio de Janeiro: Editora Fiocruz, 2015. 144 p.
- Paim, Jairnilson Silva et al. O sistema de saúde brasileiro: história, avanços e desafios [The Brazilian health system: history, advances, and challenges]. *The Lancet*, London, v. 377, n. 9779, p. 1778–1797, 2011.
- Santos, Lenir. *Direito da saúde no Brasil* [Health law in Brazil]. Campinas: Saberes Editora, 2010. 320 p.
- Starfield, Barbara. *Atenção primária: equilíbrio entre necessidades de saúde, serviços e tecnologia* [Primary care: balancing health needs, services, and technology]. Brasília: UNESCO; Ministério da Saúde, 2002. 726 p.
- Viacava, Francisco et al. Sistema de saúde brasileiro: características, avanços e desafios [Brazilian health system: characteristics, advances, and challenges]. *The Lancet*, London, v. 377, n. 9779, p. 2042–2053, 2011.