



# *Developing Cooperation between Academia and Services*

Coordination of Academia and Health  
Services in Developing Better Human  
Resources

Toronto, Ontario, October 7, 2005

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## **Brief Historical Perspective of Universities in Brazil:**

**1<sup>st</sup> and 2<sup>nd</sup> medical schools established in 1808, due to Portuguese court transfer to Brazil (Napoleonic wars).**

**Late development of Brazilian Universities compared to Hispanic America (circa 1530 vs 1924)**

**Autonomy of Universities, important to keep them alive in authoritarian times.**

**Strong reflection on education as freedom exercise, based on educator Paulo Freire**



## **Brief Historical Perspective of Universities in Brazil (cont'd):**

**1980's: Lost decade; populism and increased intake of schools; financial crisis reaches University Hospitals.**

**1975: Agreement between Ministry of Education and Social Security (adaptation of DRGs to Brazil)**

**1970's: Community medicine and experimental curricula development. Rural Internships, Utilization of ordinary services for training students.**



## **Brief Historical Perspective of Universities in Brazil (cont'd):**

**1980's: Despite of government absence, a National Inter institutional Commission of Evaluation of Medical Education (CINAEM) was set and had worked over a decade.**

**1980/90: External leverage of reforms such as Kellogg's UNI project**

**1996: New Educational Law, Minimum Curricula replaced by Flexible Guidelines with a broad participation of the players (Public Hearings)**



## Brief Historical Perspective of Universities in Brazil (cont'd):

1988: New Constitution, SUS (National Universal Health System)

Article 200: SUS "*ordena*" commands the education of HRH.

Despite of this, there is still many gaps between academia and services.



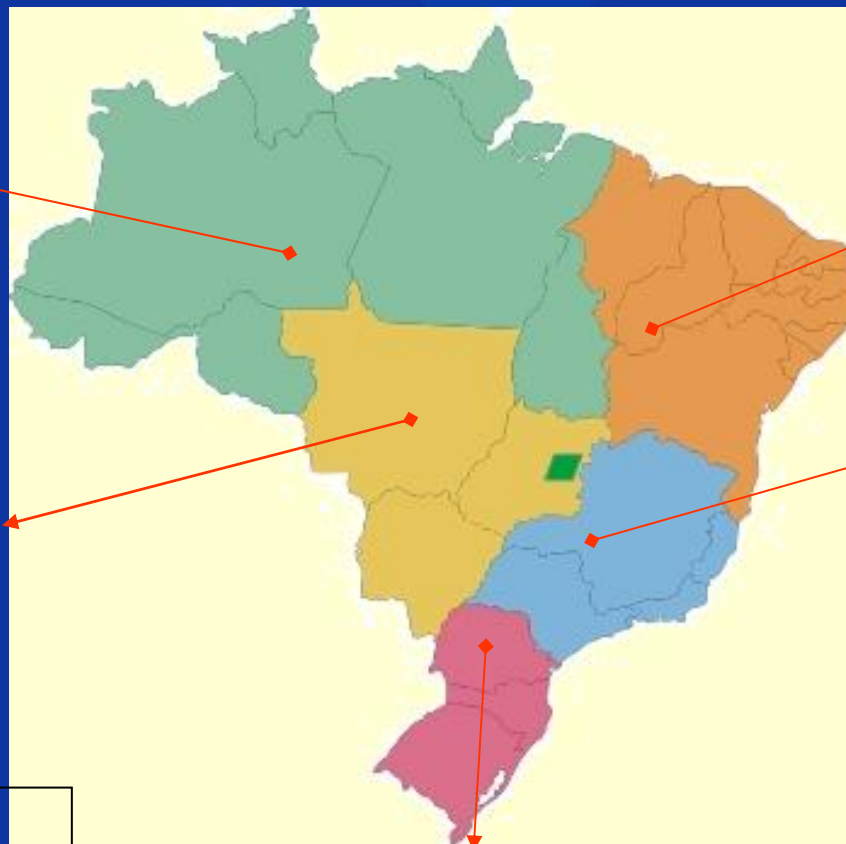
## Medical and Nursing Schools per Region Brazil, 2003

8% Medicine  
5% Nursing

17% Medicine  
14% Nursing

54% Medicine  
48% Nursing

8% Medicine  
6% Nursing



North
Northeastern
Southeastern
South
Center-West

**Total**  
**Medicine – 125**  
**Nursing - 334**

19% Medicine  
21% Nursing

Fonte: INEP/RORHES/IMS/UERJ

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# TOWARDS A TAXONOMY OF INTEGRATION

LEVEL	TEACHING	RESEARCH	SERVICES
TECHNICAL - OPERATIVE			
TECHNICAL - MANAGERIAL			
POLITICAL - INSTITUTIONAL			





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TECHNICAL - OPERATIVE	EXTRAMURAL PRACTICES PHC		
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POLITICAL - INSTITUTIONAL			





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TECHNICAL - OPERATIVE	EXTRAMURAL PRACTICES PHC		SERVICES TRADE, ESP HI-TECH
TECHNICAL - MANAGERIAL			
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POLITICAL - INSTITUTIONAL		HS DELIVERY MODELING	





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# PROPOSALS TO BRIDGE THE GAP

FINANCIAL INCENTIVES TO MEDICAL, NURSING AND DENTISTRY SCHOOLS TO ENABLE THEM HAVING OUTCOMES (E/R/S) TO TACKLE HEALTH NEEDS

“CONTRATUALIZAÇÃO” (PUBLIC EXPLICIT CONTRACTS) OF UNIVERSITY HOSPITALS, TIED TO GOALS AND NEW ROLES IN ORDER TO MEET THE PUBLIC NEEDS (STAND-ALONE HU WON'T COLLECT SUS RESOURCES)

JOINT ACCREDITATION OF SCHOOLS IN ORDER TO DRIVE (steward) THEM TO MEET SUS' NEEDS (WFME)



MERCI BEAUCOUP!

THANK YOU VERY MUCH!

MUCHAS GRACIAS!

MUITO OBRIGADO!

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