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PAUL SINGER'S ECONOMIC THOUGHT IN HEALTH AND LUIZ FERNANDO

DA SILVA'S CRITICAL ANALYSIS

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Abstract

This article aims to understand the consequences of Paul Singer's economic thinking applied to health under the critical analysis of Luiz Fernando da Silva. For this, a critical essay was carried out based on a systematic reading of the "*Economia da Saúde*" section of the book "*Prevenir e Curar*" by Singer et al. Luiz Fernando da Silva – to understand the forms of distancing-re-signification of Marxism that Singer and other authors carried out. The article is divided into two parts. The first one deals with the intellectual and political-institutional biography of Singer e Silva and the second one deals with Singer's economic thought and the thematic and theoretical displacement pointed out by Silva. Finally, it is understood that the way Singer sees health services (HS) can be attributed, in part, to the theoretical shift he experienced, however, this served to demystify the 'purely positive' aspects of HS.

Descriptors: Economic thought in health; Political economy; Marxism.

EL PENSAMIENTO ECONÓMICO EN SALUD DE PAUL SINGER Y EL ANÁLISIS CRÍTICO DE LUIZFERNANDO DA SILVA

Resumen: Se buscó comprender las consecuencias del pensamiento económico de Paul Singer aplicado a la salud bajo el análisis de Luiz Fernando da Silva. Se realizó un ensayo crítico a partir de una lectura sistemática de la sección "*Economia da Saúde*" del libro "Prevenir e Curar" de Singer y colaboradores, y también se utilizó la categoría "desplazamiento temático", fenómeno descrito por Luiz Fernando da Silva – para comprender las formas de distanciamiento-resignificación del marxismo que realizaron Singer y otros autores. El artículo se divide en dos partes. El primero trata de la biografía intelectual y políticoinstitucional de Singer e Silva y el segunda trata del pensamiento económico de Singer y el desplazamiento temático señalado.

O PENSAMENTO ECONÔMICO EM SAÚDE DE PAUL SINGER E A ANÁLISE CRÍTICA DE LUIZ FERNANDO DA SILVA

Resumo: Este artigo visa compreender os desdobramentos do pensamento econômico aplicado a saúde de Paul Singer sob a análise crítica de Luiz Fernando da Silva. Para isto, realizou-se um ensaio crítico a partir de uma leitura sistemática da seção "Economia da Saúde" do livro "Prevenir e Curar" de Singer e colaboradores e, ainda, usou-se a categoria **deslocamento** temático – fenômeno descrito por Luiz Fernando da Silva –para compreender as formas de distanciamento-ressignificação do marxismo que Singer e outros autores realizaram. O artigo está dividido em duas partes. Uma primeira que trata da biografia intelectual e político-institucional de Singer e Silva e uma segunda que trata do pensamento econômico de

Finalmente, se entiende que la forma en que Singer ve los servicios de salud (SS) puede atribuirse, en parte, al cambio teórico que experimentó, sin embargo, esto sirvió para desmitificar los aspectos 'puramente positivos' de los SS.

Descriptores: Pensamiento económico en salud; Economía política; Marxismo. Singer e o deslocamento temático e teórico apontado por Silva. Por fim, entende-se que a forma como Singer vê os serviços de saúde (SS) pode ser atribuída, em parte, ao deslocamento teórico que vivenciou, contudo, este serviu para desmistificar aspectos 'puramente positivos' dos SS.

Descritores: Pensamento econômico em saúde; Economia política; Marxismo.

INTRODUCTION

The right to universal health care in Brazil was an achievement of the Health Reform movement and reflected in the creation of the Unified Health System - SUS, through the guarantee of social and economic policies, expressing an achievement not only of the sanitarians, but of the popular movements involved in this process of struggle.

Despite the importance of the positive impacts that the Unified Health System has on the health of the population, it is urgent that the discussion surrounding the ideas that guide its actions is developed not only in superficial waters; it is necessary to deepen the analysis for a reliable understanding of the reality of Brazilian public health.

Considering the economic, political and social situation in the 1970s and 1980s, it is known that the 1988 Constitution was born in the midst of a sharp crisis of capitalism and a strong neoliberal leap in an attempt to maintain certain privileges of the ruling class.¹

This situation was part of the studies and analyses of important Brazilian intellectuals prior to the creation of the SUS, and these analyses had a profound impact on the direction of economic thinking in health in Brazil, although their aspects are still considered today.

It's important to remember that the understanding of the capitalist crisis and the ways of dealing with it are disseminated in an elementary way in the thought of Karl Marx² and many Brazilian thinkers have dedicated themselves to understanding and incorporating it into health.³ For this reason, the aim of this article is to understand the unfolding of the Brazilian

economic thinking in the light of the counterpoint of the authors Paul Singer and Luiz Fernando da Silva.

This article is divided into two parts, based on the use of the critical essay in narrative form. The first part briefly describes the intellectual and political-institutional biographies of Paul Singer and Luiz Fernando da Silva. The second part explores the meeting of both authors in economic thinking in health and in the field of social sciences and their contradictions. Finally, it considers the impact on Brazilian public health of the departure of economic thinking from Marxist methodology.

INTELLECTUAL AND POLITICAL-INSTITUTIONAL BIOGRAPHY OF SINGER E SILVA

Singer's Biography

Paul Israel Singer was born in 1932, in Austria, and came to Brazil in 1940, due to the persecution of Jews after Austria was linked to Germany. He had his first contact with politics during his third year at a public school. Together with his teachers, he took part in the first reflections on issues related to democracy, the Constitution and human rights. In 1948, he joined the Dror group (Zionist Socialist Youth Organization) and remained in it until 1952, when he ended up distancing himself from the Zionist movement.⁴

In 1949, he began his studies at the Technical School and divided his time with the Socialist Party activities. This was an important phase for his ideological formation. He started working in industry and, already with ideological and political baggage, he joined the São Paulo Metalworkers' Union.⁴

With his experience in the union and his political activism, he was one of the leaders of the strike movement known as the "300,000 strikers" in 1953, which led to his interest in economics, which was initially self-taught, through reading and studying Engels, Marx and Rosa Luxemburg. To further his economic studies, he graduated in Economic and Administrative Sciences from the University of São Paulo - USP in 1959.⁴

Between 1958 and 1964, he was part of the pioneering "Capital Group" or "Marx Seminar" study group, made up of teachers and students at USP. According to Marcelino,⁵ the group's aim was to:

to carry out a rigorous and scientific reading of Marx's greatest work, O Capital, drawing from it lessons for thinking about the Brazilian reality and finding a solution for capitalist modernity in the country, bearing in mind the social and political environment in which such an endeavor was taking place [...].⁵⁽¹²⁴⁾

In 1963, he began research for his doctoral thesis on the economic evolution of five Brazilian cities: São Paulo, Blumenau, Porto Alegre, Belo Horizonte and Recife, in which he analyzed the social factors of economic growth. Based on this, he concluded that economic activities cannot be driven solely by market mechanisms, as regional inequalities would be exacerbated. He argued that only State intervention would be able to contain this situation and possibly reverse the trend towards inequality. He obtained his doctorate in Sociology in 1964 and went on to become a lecturer in Demography and a full professor in Economics at the same university.

From this experience, Singer wrote his first academic essay entitled: "Conjuncture and Development", which was later published in his first book: "Development and Crisis",⁶ in 1968 with several subsequent editions. Later on, based on other experiences and analyses of the economic crisis that Brazil was going through, he wrote "Conjuncture Cycles in Underdeveloped Economies", initiating the creation of a general theory of the classic conjuncture cycle.

In Princeton, USA, he carried out studies analyzing the role of population growth throughout the development process, developing a theory of mutual interrelationship. He later published a book on this subject entitled "Population Dynamics and Development" (1970).⁶

He coordinated the first economic program of the Workers' Party (PT) in 1982, to make up the Government Plan of the then candidate Luiz Inácio Lula da Silva, and participated in the governments of Luiza Erundina (1989-1992), taking over the Municipal Planning Secretariat.

He also dedicated himself to studying unemployment and developing plans and programs that could reduce the number of unemployed. During Luiza Erundina's second administration in São Paulo, he created a plan to organize the unemployed into cooperatives that would produce goods and services to be consumed and exchanged by the workers, adopting their own currency to facilitate the exchange proposal, which was later named Solidarity Economy and adopted in other parts of the country and by other institutions.

Singer died on April 16, 2018. All his academic output was guided by the fundamental commitment he made when he decided to stay in Brazil: to seek ways for democratic socialism to become an option for Brazilian society.⁴

Silva's Biography

Luiz Fernando da Silva graduated in History from the Faculty of Philosophy, Sciences and Letters of Moema, São Paulo/SP. He studied journalism at Faculdade Cásper Líbero (SP). He holds a PhD (2000) and a Master's degree (1995) in Sociology from Universidade Estadual Paulista -UNESP. He stood out for his analysis of the main debates that crossed the Brazilian intelligentsia. He is currently a retired professor at UNESP. Silva is the author of several books, including: "Dependency Theory and Latin America", "Critical Analysis from the Perspective of Permanent Revolution", "Intellectuals, Political Militants and Democracy in Brazil" and "Brazilian Social Thought: Academic Marxism between 1960 and 1980".⁷

The book "Brazilian Social Thought: Academic Marxism between 1960 and 1980" deeply analyzed social thought and its shifts in the light of questions about Brazilian non-development, based on an analysis of the main debates held by the intellectuals of the time.⁸

Silva was concerned with analyzing social thought in Brazil, taking into account its political situation and historical context. With the AI-5, for example, in 1969, several Marxist intellectuals ended up going into exile in other countries; the retired academics who remained in Brazil, in an attempt to connect with society, as well as the members of the "Capital" group, created the Brazilian Center for Analysis and Planning - CEBRAP.

An important part of Silva's analysis shows that some members of the "Capital" group, such as Ianni, Weffort and Cardoso, studied Brazilian industrialization from the perspective of different class interests, using a Marxist methodology.

Silva points out that, from the 1970s onwards, there was a theoretical-ideological break on the part of intellectuals with the basis of Karl Marx's thinking. In other words, for these academics, the necessary transformations in society would take place within the logic of the State. Hence the importance of Silva's research and work. The reformist slant that he announced endures to this day and can be seen in political parties, popular movements, trade unions and also in our educational system.⁹

Silva currently dedicates himself entirely to researching the context of the international and regional capitalist crisis in Latin America, considering in his approach the dialectical method of analysis and the law of value in Marx and Engels and the theory of uneven and combined development.

PAUL SINGER'S ECONOMIC THOUGHT AND THE THEMATIC AND THEORETICAL SHIFT POINTED OUT BY LUIZ FERNANDO DA SILVA

Paul Singer was a brilliant theoretician in the field of economics, affiliated with critical political economy. His academic career was marked by his socialist militancy and his ties to discussions based on academic Marxism, starting with the "Capital" group at USP. This group's discussions focused on aspects of political economy, intertwined with readings on Brazil's development, starting with analyses of the industrialization process and moving away from the national-developmentalist vision.¹⁰

In addition to Singer, the group included intellectuals such as Fernando Henrique Cardoso, Octávio Ianni, Francisco C. Weffort and José Arthur Giannotti,¹¹ as scholars who contributed to the theoretical debate from the 1960s to the 1980s. In 1960, *Capital* was first published in the Brasiliense magazine, signed by the philosopher Giannotti. The publication sought to expose the collective debate on the study of Marx's main work.¹⁰

It was with this in mind that we came together in a heterogeneous group, which allowed us to walk with a certain amount of security within these sciences, but which cost us hours of irritating discussions in order to arrive at a common vocabulary. However, now, after more than a year of fortnightly seminars, we all feel that we are adopting a new way of understanding Marx and the problems of our society studied by this author, which will undoubtedly bear fruit.¹²⁽⁶⁰⁾

We can see that the aim of the "Capital" group was to deepen the understanding of Karl Marx's thought, taking a fresh look at the book "Capital". It was a **new** way of understanding Marx from four perspectives: 1) In comparison to the "old" way; 2) In relation to the official Marxism adopted by the majority of communist parties; 3) Because it was far removed from the theory/practice relationship; and, 4) Because of its insertion into the academic world.¹⁰

Among these variables in the understanding of the "Capital" group, it is clear that there was a marked academic production and tradition in the Social Sciences in Brazil, faced with the need to develop a framework to understand industrialization and the collective changes underway, especially in São Paulo.¹⁰

It's worth noting that there were several strands between the communist Marxists and the USP academics. The former was concerned with the theoretical-practical approach and the latter, the "Capital" group, looked at Karl Marx's writings in a scientific context, essentially in the social sciences.¹⁰

The "Capital" group was initially concerned with the methodology used by Marx, especially in his main work, under the logic of the German philosopher Georg Friedrich Hegel, considering the Capitalist Mode of Production, Merchandise, Use and Exchange Value, Concrete and Abstract Labor.

Due to the notorious exposure of the "Capital" group, some groups of intellectuals, such as those from Minas Gerais, criticized the analyses of the São Paulo collective. The central criticism included a political and economic approach that tried to explain the peculiarities of an underdeveloped country:

The process of development was therefore assimilated to that of the industrial revolution undergone by the countries of central and western Europe, North America, etc. The theory of development, thus constructed, ended up identifying the relative scarcity of capital as the main cause of underdevelopment, concentrating its efforts on finding ways to increase the savings rate of the "poor" countries, to broaden the channels of trade in colonial goods and to intensify the movement of capital from the center to the periphery of the capitalist world.⁶⁽⁷⁾

Even though there was room for approaches to social classes and their implications, there was no real articulation of revolutionary transformations in society.¹⁰

At this point, it is worth discussing the historical and political period that formed the backdrop to the development of studies on "Capital". As the 1964 military coup became imminent and the weakening of the Brazilian left unfolded, the analysis also underwent implications.

Over the years, after the coup, many intellectuals went into exile in other countries and those who remained tried to chart new paths in their intellectual practice within the social sciences.¹⁰

The importance of understanding Singer's analysis during the years in which he was part of the "Capital" group is clear. In his analysis of the economic development of Brazil, especially the economic miracle under the military government, Paul Singer stated how close the relationship was between the concentration of income, the rate of exploitation and the accumulation of capital.⁸

For him, the economic miracle produced, among its effects, the concentration of income and the deepening of inequalities, criticizing political authoritarianism and the idea of prioritizing growth over income distribution.¹⁰

Based on Silva,¹⁰ it is possible to conclude that Singer's analysis was based on income distribution. This can be seen in his analyses of the relationship between economics and health in

"Prevenir e Curar: o controle social através dos serviços de saúde",¹³ insofar as they problematize the centrality of social and economic inequalities in analyzing a population's state of health.

In the 1970s, the shift away from Marxist themes had already begun. Cardoso, for example, limited himself to social democracy, starting from the idea that the capitalist state would be able to minimize social inequalities and the system's crises. At a specific moment during the military dictatorship, with the AI-5, the social movements and groups proposing the class struggle and the Brazilian revolution were sidelined by these intellectuals, so that the foundation of the Marxist methodology in their analysis was lost.¹⁰

Weffort also presented this thematic shift. He proposed that there should be a certain conciliation between the classes, with greater participation by the working classes. Finally, Octávio Ianni's analyses still produced a certain class consciousness and an understanding that classes are heterogeneous among themselves.¹⁰ It can be seen below that Ianni maintained the idea of class struggle and collective and popular articulation in his analyses.

In order to put its revolutionary condition into practice, however, the working class needs to appropriate the theory of the socialist revolution and organize itself into a workers' political party, independent of the parties of the other social classes. The party is not only the instrument of struggle, but also the environment in which they can elaborate and re-elaborate their real life experiences. It is in the party that the experience of workers as a social class is socialized.¹⁴⁽⁸¹⁻⁸²⁾

The group's trajectory was different. Fernando Henrique Cardoso was elected senator by the PMDB; Weffort was secretary-general of the PT and Singer, in 1989, was secretary of planning in Luiza Erundina's PT city hall in São Paulo. Octávio Ianni was the only one who remained at the University, maintaining the tone of Marx's works, albeit in a subtle way.

Silva points out that this thematic and theoretical shift by Marxists in relation to political disputes in the state and civil society, prioritizing the class struggle, then became conscious. In this period, the late 1960s and early 1970s, there was a commercial landowning class that still antagonized the need for industrialization in Brazil. However, with the worsening of political restrictions on the population by the military, this intelligentsia had to move to CEBRAP. Some of them remained within the academic Marxist concept, like Giannotti, and were criticized for this alienation from the Brazilian conjuncture.

For the CEBRAP group, capitalism in Brazil did not derive from the European feudal model, but from modern slavery, which imprisoned the working classes in castes. For this reason, Silva emphasizes that this group develops the importance of class consciousness in Brazilian society, dominated until then by a bourgeoisie historically marked by an association with the interests of international capital that maintained the accumulation of income in sectors.

CEBRAP has been active for 50 years and stands out on the national scene for carrying out research, publications and seminars with rigor and importance for public debate. With a focus on the Brazilian reality, CEBRAP conducts research in a variety of areas and themes, such as development, innovation, sustainability, cities, urban mobility, inequality, population, health, education, social movements, democracy, violence, human rights, race, gender, religion and drug policy. Much of his research supports decision-making strategies for public institutions, civil society associations and companies.

Paul Singer believed, however, that the Brazilian crisis was more cyclical than structural and suggested that the resumption of economic growth could be achieved through new policies. He then began to develop his idea of solidarity economy.¹⁵

Singer dialogued with the still incipient field of Health Economics, an aspect that is little commented on in Silva's text. He discusses how the state of health and illness can be modified by social norms and that the manifestation and recognition of this state are strongly related to social class.

Therefore, the health and illness of the working class only have value when they are reflected in absence from work and temporary disabilities. Even permanent disability is of no concern to public opinion or the state. So what is the role of the Health Services (HS) in these agreements?

Conceptualizing A Population's State Of Health

In their 1981 book "*Prevenir e curar* [...]"¹³, Singer, Campos and Oliveira criticize the understanding of a population's state of health as the result of the sum of a set of actions, programs and services available for use. They point out that there is a possibility of negative effects on the health of populations as a result or, in the words of the authors, collateral effects, arising from the actions of the HS. In fact, the HS contribute to both increasing and reducing morbidity because they determine the health status of the population as participants in the social process which, in a way, produces the state of health-disease.

The contribution of HS to increasing morbidity is in two ways: effectively causing illness through the way they diagnose health problems - the so-called iatrogenesis - and creating

categories of morbidity, such as behavioral diseases. Their contribution to reducing morbidity is obviously through their preventive and curative activities.¹³

From this perspective, in order to carry out global analyses and evaluations of the effects of Health Services on populations, Singer, Campos and Oliveira¹³ propose two basic methodological procedures:

1. Defining what is meant by the population's state of health, and 2. Determining the factors that influence the population's health and measuring the degree of influence of each one.¹³⁽⁶⁸⁾

Starting with the methodological proposition, the authors discuss two different ways of approaching the state of health of a population, "one through an ideal concept and the other through a descriptive sociological concept, about the processes by which a society recognizes or determines the state of health of its members".¹³⁽⁷¹⁾ Here, we begin to find the distributive axis that starts from mediations that find in social inequalities and concentration of income the analyses of Paul Singer, of which Silva spoke.¹⁰

Presenting a set of problematizations of the normalizing paradigm on the concept of health that emerges from the ideal concept, the authors analyze how the health of populations comes to be thought of based on biological and psychological standards for defining a state of health. In this sense, the process of becoming ill is interpreted as the result of a deviation from these norms. There is also, as the authors point out, a focus on morbidity as an indicator, so that the assessment of a population's state of health as optimal or not will be directly related to the morbidity rate, the number of sick people, i.e. incapacity to work.

The authors point to the creation of the concept of complete physical, mental and social well-being formulated by the World Health Organization (WHO) as a positive result of the ideal concept, which, as they point out, "at least has the merit of recognizing that it is paradoxical for someone to be considered in good health when they are affected by poverty". ¹³⁽⁷¹⁾ However, despite its merit, the concept lacks functionality insofar as it does not present any criticism of the effects of the economic, social and political system on the health of individuals and the community, "implying an evaluation of systems (including health systems) according to the needs and possibilities of individuals".¹³⁽⁷¹⁾

In these problematizations, Paul Singer's analytical link with political economy, as pointed out by Silva,¹⁰ emerges when he brings the centrality of work in a class society to the discussion

about the health status of populations, insofar as he points out that "attitudes towards illness seem to have a strong class character in today's capitalist societies".¹³⁽⁷¹⁾

The relationship between the recognition and determination of illness among different populations points to classes whose economic impositions make it difficult for them to give up work, inhibiting their posture and presentation to the community as a whole as being ill, preventing the public appearance of symptoms that produce a collective recognition of the illness. For the authors, it is "man's relations with the social environment that shape the individual's attitude towards the signs of organic alteration that he is made aware of".¹³⁽⁷¹⁾

Thus, from the authors' perspective, it is illusory to separate the individual's perception of their organic functions and irruptions, their state of health, from the set of social relationships in which they are immersed. The latter also determine the perception of the former. According to Singer, Campos and Oliveira:¹³

We can therefore conclude that the state of health of a population, as it effectively manifests itself in the behavior of individuals and social groups, is not constituted by the greater or lesser departure from an ideal norm, but by the greater or lesser presence of socially recognized morbid states [...]. What reduces health are certain contradictions, which take the form of morbidity or, in other words, a population enjoys maximum health when it is not affected by contradictions that take that form.¹³⁽⁷¹⁾

From this perspective, based on the points made by Silva (2003) about Paul Singer's trajectory, it can be inferred from his analyses that the way in which a population's state of health is determined and recognized should not be seen in relation to an ideal standard or under the conceptualization of the WHO, but rather by the possibilities of becoming ill or not, as well as the recognition of this illness, in the midst of the contradictions of the capitalist system. Thus, the state of health of a population is intrinsically linked to the social class to which it belongs.

In addition to the possibilities of publicly presenting the process of becoming ill and thus having it recognized in the social environment, Singer, Campos and Oliveira¹³ also analyze illnesses as effects produced by capitalist sociability itself, to the extent that certain morbidities are related to the impossibility of production and work, citing madness and behavioral illnesses as examples. Diseases produced by the control services of the Health Systems based on the medicalization of conduct considered socially deviant.

From this perspective, the state of health of a population is related to the development of productive forces and the organization of relations of production, which determine the processes

of health and illness in populations.¹³ In this direction, linked to the analyses that emerge from USP Marxism, of which Paul Singer was a part,⁸ the state of health is analyzed from the perspective of critical political economy, understood as historically determined and by the contradictions that emerge from the capitalist system.¹³

Marxist Thematic Shift In Health

In order to evaluate health services, the authors point out that it is necessary to consider

a) the evolution of the health field itself and the limits of what is considered morbidity; b) the factors responsible for the contradictions that make up this field; c) the evolution of HS in their various functions of identifying, preventing, curing and manipulating morbid states.¹³⁽⁷¹⁾

In this approach, the authors deal with the relationship between morbidity, environmental factors and health services, moving on from the analysis that sees the only function of health services as reducing morbidity through their preventive and curative actions, pointing out that they contribute to both the increase and reduction of morbidity.¹³

In short, we can see that Paul Singer's analysis of the state of health of the population and the function of the social services is shaped by his academic career, centered on the critique provided by Marxist political economy. This consideration was made in view of the fact that the discussion has as its background the centrality of work, class inequalities and the contradictions that emerge from the capitalist system, producing effects in the increase or reduction of morbidities recognized from the historical point of view in a social environment.

At the beginning of the 21st century⁸, Luiz Fernando da Silva developed an analysis of the main debates that took place in the Brazilian intelligentsia, from Rio de Janeiro to São Paulo and Minas Gerais. But it is in the São Paulo group, initially at USP and, after the hardening of the military dictatorship, in institutions often financed by private capital, that he focuses on the evolution from a pure Marxist methodology to explain the reason for Brazilian underdevelopment to a contextualization of structural dependence, historicity and political openness.

Initially, he presents the Instituto Superior de Estudos Brasileiros - ISEB (Higher Institute of Brazilian Studies) in Rio de Janeiro, which proposed resolving non-developmentalism through industrialization and state planning. Starting with "Capital", at USP, he shows how São Paulo academics proposed an alternative to pure industrialization with a reduction in dependency, social inequality and the strengthening of democracy. We understand that the theoretical concerns about

health care thought up by Singer and his collaborators are also the result of this kind of theoretical shift in thinking about health beyond the process of organizing services as the owners of prevention and cure.

FINAL CONSIDERATIONS

The constitutional enactment of a universal healthcare system was an act of courage and a popular achievement. The SUS revolutionized access to healthcare for citizens, taking a good portion of the population off the margins of society. This achievement can in no way be taken lightly, but it is necessary, especially nowadays, to critically analyze its development and creation.

In Brazil, the shape of the health system is characterized by the overlapping links of service providers to public and private funding, and by the strong presence of a private insurance segment. This dichotomy is compounded by the extent of social and economic inequalities in the regions. The COVID-19 pandemic has exposed the importance of the SUS for all Brazilians, even those associated with private plans. Once again, as Singer points out, the Health Services determined how the population had access to health care.

The Brazilian Marxists who had a certain notoriety in the country moved away from the central conception of Karl Marx's methodology and his way of thinking about and transforming the different relations between social classes. This thematic shift was impeccably pointed out by Luiz Fernando da Silva and this shift explains many of the impasses in Brazilian health.

The Unified Health System was born during a strong neoliberal onslaught in Brazil, influenced by a new fall in the profit rates of world capital. Although Paul Singer's text "*Prevenir e curar: o controle social através dos serviços de saúde*"¹³ is more than 40 years old, his observations are still relevant today. The twists and turns of economic and health policies were and are so significant that we are increasingly moving away from the doctrinal principles of the SUS: universality, integrality and equity.

How can a universal health system coexist within a capitalist structure, where the logic responds to a particular mode of production? Is it contradictory or optimistic to think of health itself within a system that sickens the environment and exploits workers?

The contradictions pointed out by Silva touches on precisely this analysis, which has long since been abandoned, and expose in a very concrete and practical way where we have lost our way. And why we lost our way. Proof of this are the deep blows that Brazilian public health has

suffered over the decades. As well as the lack of funding, with derisory investments in health, the precariousness of services and the devaluation of professionals, Brazil is still suffering through the criminal practices of the federal government, aligned with the ruling classes, which has made it impossible for the grassroots movements to effectively work together to protect Brazilians.¹⁶

The HS and, consequently, medicine, in the context of a peripheral capitalist society like Brazil's, act as instruments of social control. This control perpetuates the social structure and the unfavorable living conditions of the working classes, the forms of exploitation and domination of the landowning classes and the more technically specialized classes.

These problems translate into different states of illness and health depending on the social class, hence the important role of health services, which must be constantly assessed as to whether or not they induce "deviations" from a supposed "social normativity" and how they can (and should) develop strategies for transforming a situation in crisis, while ensuring equal access.

AUTHORIAL CONTRIBUTION

APAP contributed the introduction, biography, discussion, final considerations and final revision of the text. BMJ contributed to the discussion, as well as the final revision of the text. DGF contributed the introduction and biography. JMD contributed the introduction, biography and final considerations, as well as the final revision of the text. LIM contributed the introduction and biography. MFRS contributed to the discussion, final considerations and final revision of the text.

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